



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00199

Approval Code: 085183 6/28/2018 11:35 am

E-mailed To: JDENNIS@ARS.COM

PLAN REVIEW

- Please check all that apply:**
- Med gas/vacuum system or health care facility
 - Vacuum drainage waste and vent system
 - Commercial booster pump
 - Addition of a new motor load
 - Installation of multi-purpose fire sprinkler systems
 - Wastewater pretreatment system
 - Reclaimed wastewater
 - Chemical drainage waste and vent systems
 - Multi-purpose Fire sprinkler system
 - Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer

FEE SCHEDULE

Description	Qty.	Ea.	Total
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

TYPE OF WORK

- New Construction Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

- 1 or 2 family dwelling Multi-family Commercial Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 11250 SW CHICKADEE TER

City/State/ZIP: BEAVERTON, OR 97007

Suite/bldg./apt.no.:

Project Name: NELSON

Cross Street/directions to job site:

Tax map/parcel no.: 1S132CA08000

DESCRIPTION OF WORK

APPROX 50 FT EXTERIOR WATER SERVICE REPLACEMENT ON PROPERTY ERIC NELSON

APPLICANT

Name: JOYCE DENNIS

Phone: 5038503100

Fax: 9012719706

Email:

CONTRACTOR

Plumb lic. no.: 34-168PB

CCB lic. no.: 127325

Business Name: AMERICAN RESIDENTIAL SERVICES LLC

Contact:

Address: 965 RIDGE LAKE BLVD SUITE 201

City/State/ZIP: MEMPHIS, TN 38120

Phone: 9012719700

Fax: 9012719706

Email: mfrederick@ars.com

Metro lic. no.:

City lic. no.:

June 2018

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

Date Received: <u>6-29-18</u>	Permit No: <u>32018-2882</u>
Date Issued: <u>6-29-18</u>	By: <u>RL</u>
Payment Type: <u>check</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>7300 Hyland Ct</u>	
City/State/ZIP: <u>Beaverton, OR 97008</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Replacing sewer line from clean out to main by trenching with 4" ABS pipe and 3034 PVC pipe	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Wedgewood</u>	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>Mr Rooter Plumbing</u>	
Contact name: <u>Brian Lee</u>	
Address: <u>PO Box 789</u>	
City/State/ZIP: <u>Gladstone, OR 97027</u>	
Phone: <u>(503) 653-5301</u>	Fax:
E-mail: <u>brianl@mrrooterportland.com</u>	
CONTRACTOR	
Business name: <u>Same as above</u>	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail: <u>brianl@mrrooterportland.com</u>	Plumbing. lic.: <u>3-434PB</u>
CCB lic.: <u>138941</u>	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0/100</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input checked="" type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

Authorized signature:

Print name: Brian Lee Date: 06/29/18

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

Date Received: <u>6-29-18</u>	Permit No.: <u>B2018-2881</u>
Date Issued: <u>6-29-18</u>	By: <u>JH</u>
Payment Type: <u>check</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 10145 SW 151st Place	
City/State/ZIP: Beaverton, Oregon 97007	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: SW Sandpiper Lane	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Backflow replacement	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Chris Hammond	
Address: 10145 SW 151st Place	
City/State/ZIP: Beaverton, Oregon 97007	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Cascadian Landscapers, Inc	
Contact name: David Palm	
Address: 21510 NW Farm Park Dr	
City/State/ZIP: Hillsboro, OR 97124	
Phone: (971) 404-9750	Fax: (503) 647-9922
E-mail: david@cascadianlandscapers.com	
CONTRACTOR	
Business name: Cascadian Landscapers, Inc	
Address: 21510 NW Farm Park Dr	
City/State/ZIP: Hillsboro, Or 97124	
Phone: (503) 647-9933	Fax: (503) 647-9922
E-mail: art@cascadianlandscapers.com	Plumbing. lic.: LCB#5185
CCB lic.: 51443	City or metro lic. no.:
Authorized signature:	
Print name: Art Meisner	Date: 06/25/18

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input checked="" type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00197

Approval Code: 03147G 6/27/2018 7:51 pm

E-mailed To: ronht27@yahoo.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 2230 SW 85TH AVE	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S112BB10200	
DESCRIPTION OF WORK	
replumb water and partial drainage	
APPLICANT	
Name: ron taylor	
Phone: 5036584806	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 3-354PB	CCB lic. no.: 124265
Business Name: PLEASANT VALLEY PLUMBING INC	
Contact:	
Address: 13540 SE MTN VW LN	
City/State/ZIP: CLACKAMAS, OR 97015	
Phone: 5036584806	Fax:
Email:	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Clothes washer	1	\$20.31	\$20.31
Sink/basin/lavatory	5	\$20.31	\$101.55
Tub/shower/shower pan	2	\$20.31	\$40.62
Water closet	2	\$20.31	\$40.62
Hose bib	2	\$20.31	\$40.62
Plumbing Permit Fees			
Subtotal			\$243.72
State surcharge (12% of permit total)			\$29.25
TOTAL PERMIT FEE			\$272.97

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

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City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00198

Approval Code: 028337 6/28/2018 7:49 am

E-mailed To: cornel@cornelsplumbing.com

B 2018-2868

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 8331 SW CHEVY PL	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128BA06600	
DESCRIPTION OF WORK	
Move kitchen sink, hose bibb, new dishwasher , garbage disposal, ice maker line	
APPLICANT	
Name: Corneliu Morariu	
Phone: 5033179659	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 34-392PB	CCB lic. no.: 140695
Business Name: CORNELIU MORARIU	
Contact:	
Address: 5235 SW 153RD AVE	
City/State/ZIP: BEAVERTON, OR 97007	
Phone: 5036460941	Fax:
Email: cornel@cornelsplumbing.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load <input type="checkbox"/> Wastewater pretreatment system		<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system	
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Dishwasher	1	\$20.31	\$20.31
Garbage disposal	1	\$20.31	\$20.31
Ice maker	1	\$20.31	\$20.31
Sink/basin/lavatory	1	\$20.31	\$20.31
Hose bib	1	\$20.31	\$20.31
Plumbing Permit Fees			
Subtotal			\$101.55
State surcharge (12% of permit total)			\$12.19
TOTAL PERMIT FEE			\$113.74

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

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Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>6-28-18</u>	Permit No.: <u>B2018-2864</u>
Date Issued: <u>6-28-18</u>	By: <u>[Signature]</u>
Payment Type: <u>Visa</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>5775 sw. 141st Ave</u>	
City/State/ZIP: <u>Beaverton, OR 97005</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>restroom, 2 sinks,</u>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Lucia Logo Guerrero</u>	
Address: <u>5775 sw. 141st Ave.</u>	
City/State/ZIP: <u>Beaverton, OR 97005</u>	
Phone: <u>503-929-2291</u>	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <u>Home Owner</u>	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	Plumbing. lic.:
CCB lic.:	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (____, sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.:____)		*	
Storm sewer (no. linear ft.:____)		*	
Water service (no. linear ft.:____)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ _____)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	<u>3</u>	20.31	
Tub/shower/shower pan	<u>1</u>	20.31	
Urinal		20.31	
Water closet	<u>1</u>	20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			
TOTAL PERMIT FEE			<u>\$113.74</u>

Authorized signature: [Signature]

Print name: _____ Date: 06-28-18

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * See Fee Schedule



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

Date Received: <u>6-28-18</u>	Permit No.: <u>B2018-2857</u>
Date Issued: <u>6-28-18</u>	By: <u>AK</u>
Payment Type: <u>Check</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>5620 SW Menlo Dr</u>	
City/State/ZIP: <u>Beaverton OR 97005</u>	
Suite/bldg./apt. no.:	Project name: <u>Tub instalation</u>
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Replacing a shower with a alcove tub/shower</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Scott Brown</u>	
Address: <u>5620 SW Menlo Dr</u>	
City/State/ZIP: <u>Beaverton OR 07995</u>	
Phone: <u>(971) 413-8081</u>	Fax:
E-mail: <u>brown145@gmail.com</u>	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>Home owner</u>	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <u>Home owner</u>	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	Plumbing, lic.:
CCB lic.:	City or metro lic. no.:
Authorized signature:	
Print name: <u>Scott Brown</u>	Date: <u>06/19/18</u>

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1-2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan	1	20.31	20.31
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * See Fee Schedule



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

Date Received: <u>6-28-18</u>	Permit No.: <u>B2018-2352</u>
Date Issued: <u>6-28-18</u>	By: <u>JOK</u>
Payment Type: <u>Visa</u>	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>14475 SW Barrows Rd</u>	
City/State/ZIP: <u>Beaverton, OR 97005</u>	
Suite/bldg./apt. no.:	Project name: <u>Morningstar of Beaverton</u>
Cross street/directions to job site: <u>SW Murray Blvd</u>	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Landscape & Irrigation Installation - Installation of Backflow Device</u>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>DeSantis Landscapes, Inc</u>	
Contact name:	
Address: <u>7907 State St</u>	
City/State/ZIP: <u>Salem, OR 97317</u>	
Phone: <u>(503) 364-8376</u>	Fax: <u>(503) 364-8064</u>
E-mail: <u>isabelt@desantislandscapes.com</u>	
CONTRACTOR	
Business name: <u>DeSantis Landscapes, Inc.</u>	
Address: <u>7907 State St</u>	
City/State/ZIP: <u>Salem, OR 97317</u>	
Phone: <u>(503) 364-8376</u>	Fax: <u>(503) 364-8064</u>
E-mail: <u>isabelt@desantislandscapes.com</u>	Plumbing, lic.:
CCB lic.: <u>146197 & LCB lic: 5876</u>	City or metro lic. no.:
Authorized signature:	Date: <u>06/28/20</u>

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer	<u>1</u>	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

Date Received: 6-26-18	Permit No.: B2018-2819
Date Issued: 6/26/2018	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 116985 NW Hazelgrove Ct.	
City/State/ZIP: Beaverton, OR 97000	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Install 25ft cipp liner cleanout located outside. end of liner near city main.	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Same as below ✓	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Apollo Drain + Rooter Inc.	
Address: 853 NE Harlow Rd.	
City/State/ZIP: Troutdale, OR 97060	
Phone: 503-239-8801	Fax:
E-mail: office@apollodrain.com	Plumbing lic.: 26-533PB
CCB lic.: 49418	City or metro lic. no.: 3082

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0.55 ft)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule

Authorized signature: [Signature]
 Print name: Marquita Martin Date: 6/26/18



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00196

Approval Code: 616291 6/26/2018 2:19 pm

E-mailed To: VICTOR@DESIGNBUILDLANDSCAPE.COM

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 7545 SW ESCALON PL	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Hoggard Residence	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121DD04900	
DESCRIPTION OF WORK	
New backyard lawn and irrigation	
APPLICANT	
Name: Joey McCarry	
Phone: 9712274516	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 8698	CCB lic. no.:
Business Name: VICTOR E DESIGN BUILD LANDSCAPE LLC	
Contact: VICTOR E DESIGN BUILD LANDSCAPE LLC	
Address: 12120 SW 1ST ST	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 5035359921	Fax:
Email: VICTOR@DESIGNBUILDLANDSCAPE.COM	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load <input type="checkbox"/> Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Backflow preventer	1	\$43.68	\$43.68
Minimum Fees			
Balance of permit fees			\$52.96
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



Plumbing Permit Application

City of Beaverton Community Development
 PO Box 4755, Beaverton, OR 97076
 Phone: (503) 526-2403; Fax: (503) 526-2550
 Internet address: www.BeavertonOregon.gov

OFFICE USE ONLY

Date Received: 3-7-18	Permit No.: B2018-0997
Date Issued: 6-27-18	By: <i>HL</i>
Payment Type: CHECK	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12133 SW Tesla Terrace	
City/State/ZIP: Beaverton OR 97008	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: Tesla Terrace	Lot no.: 14
Tax map/parcel no.:	
DESCRIPTION OF WORK	
New sfa	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Same as applicant	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Westwood Homes LLC	
Contact name: Matt Fricke	
Address: 12700 NW Cornell Rd	
City/State/ZIP: Portland, OR 97229	
Phone: (971) 678-5018	Fax:
E-mail: Matt@westwoodhomesllc.com	
CONTRACTOR	
Business name: H & H Mechanical	
Address: 5757 SE Willow Lane	
City/State/ZIP: Milwaukie, OR 97267	
Phone: (503) 975-9787	Fax: (503) 659-2979
E-mail:	Plumbing. lic.:
CCB lic.: 178122	City or metro lic. no.:

Authorized signature: *Dustin Haugue*

Print name: **DUSTIN HAUGUE** Date: **3/6/18**

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1-2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		292.82	0.00
SFR (2) bath		336.74	0.00
SFR (3) bath	1	380.67	0.00
Each additional bath/kitchen	1	35.16	0.00
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		15.25	0.00
Drywell, leach line, or trench drain		15.25	0.00
Footing drain		15.25	0.00
Manufactured home utilities		15.25	0.00
Rain drain connector		15.25	0.00
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		15.25	0.00
Backflow preventer	1	32.79	0.00
Backwater valve		15.25	0.00
Clothes washer		15.25	0.00
Dishwasher		15.25	0.00
Drinking fountain		15.25	0.00
Ejectors/sump		15.25	0.00
Fixture/sewer cap		15.25	0.00
Floor drain/floor sink/hub/ primer		15.25	0.00
Garbage disposal		15.25	0.00
Hose bib		15.25	0.00
Ice maker		15.25	0.00
Interceptor/grease trap		15.25	0.00
Medical gas (value: \$ 0)		*	0.00
Roof drain (commercial)		15.25	0.00
Sink/basin/lavatory	1	15.25	0.00
Tub/shower/shower pan		15.25	0.00
Urinal		15.25	0.00
Water closet		15.25	0.00
Water heater/expansion tank	1	15.25	0.00
Water meter pvt		15.25	0.00
1&2 family dwelling re-pipe		108.90	0.00
Multi-family/commercial re-pipe (first 20 fixtures)		108.90	0.00
Multi-family/commercial re-pipe ea. fixture over 20		7.26	0.00
Other:		15.25	0.00
Subtotal			
Minimum permit fee			72.60
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			8.71
TOTAL PERMIT FEE			3668.82

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule



Plumbing Permit Application

City of Beaverton Community Development
 PO Box 4755, Beaverton, OR 97076
 Phone: (503) 526-2403; Fax: (503) 526-2550
 Internet address: www.BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 1-3-18	Permit No.: B2018-0027
Date Issued: 6-27-18	By: HK
	Payment Type: check

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 12135 SW Tesla Terrace	
City/State/ZIP: Beaverton, OR 97008	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.: 15
Tax map/parcel no.:	
DESCRIPTION OF WORK	
New sfa	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Same as applicant	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Westwood Homes LLC	
Contact name: Matt Fricke	
Address: 12700 NW Cornell Rd	
City/State/ZIP: Portland, OR 97229	
Phone: (971) 678-5018	Fax:
E-mail: Matt@westwoodhomesllc.com	
CONTRACTOR	
Business name: H & H Mechanical	
Address: 5757 SE Willow Lane	
City/State/ZIP: Milwaukie, OR 97267	
Phone: (503) 975-9787	Fax: (503) 659-2979
E-mail:	Plumbing. lic.:
CCB lic.: 178122	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		292.82	0.00
SFR (2) bath		336.74	0.00
SFR (3) bath	1	380.67	0.00
Each additional bath/kitchen	1	35.16	0.00
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		15.25	0.00
Drywell, leach line, or trench drain		15.25	0.00
Footing drain		15.25	0.00
Manufactured home utilities		15.25	0.00
Rain drain connector		15.25	0.00
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		15.25	0.00
Backflow preventer	X	32.79	0.00
Backwater valve	X	15.25	0.00
Clothes washer	X	15.25	0.00
Dishwasher	X	15.25	0.00
Drinking fountain		15.25	0.00
Ejectors/sump		15.25	0.00
Fixture/sewer cap		15.25	0.00
Floor drain/floor sink/hub/ primer		15.25	0.00
Garbage disposal	X	15.25	0.00
Hose bib	X	15.25	0.00
Ice maker		15.25	0.00
Interceptor/grease trap		15.25	0.00
Medical gas (value: \$ 0)		*	0.00
Roof drain (commercial)		15.25	0.00
Sink/basin/lavatory	2	15.25	0.00
Tub/shower/shower pan	2	15.25	0.00
Urinal		15.25	0.00
Water closet	4	15.25	0.00
Water heater/expansion tank	X	15.25	0.00
Water meter pvt		15.25	0.00
1&2 family dwelling re-pipe		108.90	0.00
Multi-family/commercial re-pipe (first 20 fixtures)		108.90	0.00
Multi-family/commercial re-pipe ea. fixture over 20		7.26	0.00
Other:		15.25	0.00
Subtotal			
Minimum permit fee			72.80
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			8.71
TOTAL PERMIT FEE			\$81.31

Authorized signature:

Print name: DUSTIN HAUGUE Date: 6/20/18

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * See Fee Schedule

619.90



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00195

Approval Code: 064309 6/26/2018 10:25 am

E-mailed To: eagleplumbing@integra.net

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13535 SW CHARIOT CT	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: 13535 SW Chariot Ct	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128CA09300	
DESCRIPTION OF WORK	
Plumbing for remodel of kitchen	
APPLICANT	
Name: Carl Cross	
Phone: 5036508703	Fax: 5036508720
Email:	
CONTRACTOR	
Plumb lic. no.: 3-154PB	CCB lic. no.: 47914
Business Name: EAGLE PLUMBING ENTERPRISES INC	
Contact:	
Address: 13801 S FORSYTHE RD	
City/State/ZIP: OREGON CITY, OR 97045	
Phone: 5036508703	Fax:
Email: eagleplumbing@qwest.net	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Dishwasher	1	\$20.31	\$20.31
Garbage disposal	1	\$20.31	\$20.31
Sink/basin/lavatory	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$35.71
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

Date Received: <i>6/14/2018</i>	Permit No.: <i>82018-2622</i>
Date Issued: <i>6/14/2018</i>	By: <i>[Signature]</i>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 9645 SW Beaverton Hillsdale Hwy	
City/State/ZIP: Beaverton, OR 97005	
Suite/bldg./apt. no.:	Project name: New Office
Cross street/directions to job site: SW 96th Ave	
Subdivision: Woodland Acres No.2	Lot no.: 31
Tax map/parcel no.: 1S114BA	
DESCRIPTION OF WORK	
<i>Re-configure plumbing for new layout</i>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Matt Williams	
Address: 15252 SW Ivy Glen Ct.	
City/State/ZIP: Beaverton, OR 97007	
Phone: (503) 616-8592	Fax:
E-mail: matt@straightlinedr.com	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Straight Line Design and Remodeling LLC	
Contact name: <i>Steve Griffin</i>	
Address: 9645 SW Beaverton Hillsdale Hwy	
City/State/ZIP: Beaverton, OR 97005	
Phone: (971) 275-3261	Fax:
E-mail: steve@straightlinedr.com	
CONTRACTOR	
Business name: Troy Elliott Plumbing Inc	
Address: PO Box 1958	
City/State/ZIP: North Plains, OR 97133	
Phone: (503) 647-5565	Fax:
E-mail:	Plumbing. lic.: 34-402B
CCB lic.: 152130	City or metro lic. no.:
Authorized signature: <i>[Signature]</i>	
Print name: Troy Elliott	Date: 06/12/18

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher	1	20.31	20.31
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal	1	20.31	20.31
Hose bib	1	20.31	20.31
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	3	20.31	60.93
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet	2	20.31	40.62
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			162.48
Minimum permit fee			
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			19.50
TOTAL PERMIT FEE			\$181.98

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222 V/TDD
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>6-25-18</u>	Permit No.: <u>B2018-2797</u>
Date Issued: <u>6-25-18</u>	By: <u>JL</u>
Payment Type: <u>Visa</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>2929 SW Cedar Hills Blvd</u>	
City/State/ZIP: <u>Beaverton OR 97005</u>	
Suite/bldg./apt. no.:	Project name: <u>First Tech C.U.</u>
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>ADD - 2 ada w/c's, 2 lavs, 1 sink, 1DW, 1 WATER HEATER</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>RAYBORN'S PLUMB</u>	
Contact name: <u>HANS HALDENSON</u>	
Address: <u>19990 SW CIPOLERA</u>	
City/State/ZIP: <u>Tualatin OR 97062</u>	
Phone: <u>503-692-4139</u>	Fax: <u>503-691-2328</u>
E-mail: <u>HANS@RAYBORN'S.COM</u>	
CONTRACTOR	
Business name: <u>RAYBORN'S PLUMB</u>	
Address: <u>19990 SW CIPOLERA</u>	
City/State/ZIP: <u>Tualatin OR 97062</u>	
Phone: <u>503-692-4139</u>	Fax: <u>503-692-4139</u>
E-mail: <u>hate@rayborns.com</u> Plumbing lic.: <u>34-166 P13</u>	
CCB lic.: <u>87852</u>	City or metro lic. no.: <u>1806</u>
Authorized signature: <u>[Signature]</u>	
Print name: <u>HANS HALDENSON</u>	Date: <u>6/25/18</u>

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1-2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		354.31	
SFR (2) bath		407.45	
SFR (3) bath		460.61	
Each additional bath/kitchen		42.55	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		18.46	
Drywell, leach line, or trench drain		18.46	
Footing drain		18.46	
Manufactured home utilities		18.46	
Rain drain connector		18.46	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		18.46	
Backflow preventer		39.71	
Backwater valve		18.46	
Clothes washer		18.46	
Dishwasher	<u>(1)</u>	18.46	
Drinking fountain		18.46	
Ejectors/sump		18.46	
Fixture/sewer cap		18.46	
Floor drain/floor sink/hub/ primer		18.46	
Garbage disposal		18.46	
Hose bib		18.46	
Ice maker		18.46	
Interceptor/grease trap		18.46	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		18.46	
Sink/basin/lavatory	<u>(3)</u>	18.46	
Tub/shower/shower pan		18.46	
Urinal		18.46	
Water closet	<u>(2)</u>	18.46	
Water heater/expansion tank	<u>(1)</u>	18.46	
Water meter pvt		48.46	
1&2 family dwelling re-pipe		131.77	
Multi-family/commercial re-pipe (first 20 fixtures)		131.77	
Multi-family/commercial re-pipe ea. fixture over 20		8.79	
Other:		18.46	
Subtotal			<u>142.17</u>
Minimum permit fee			8.79
<input type="checkbox"/> Check for Plan Review: Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			<u>\$17.06</u>
TOTAL PERMIT FEE			<u>\$159.23</u>

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

Date Received: <u>6/22/2018</u>	Permit No: <u>P2018-2675</u>
Date Issued: <u>6/22/2018</u>	By: <u>[Signature]</u>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>16557 SW Timberland</u>	
City/State/ZIP: <u>Beaverton, OR 97</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Backflow, Rاندrain</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Dat O conner</u>	
Address: <u>16557 SW Timberland</u>	
City/State/ZIP: <u>Beaverton OR</u>	
Phone: <u>503-591-9617</u>	Fax:
E-mail: <u>[Signature]</u>	
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: <u>Ram Jack West</u>	
Contact name: <u>BECKI TESTER</u>	
Address: <u>862 Bethel Dr</u>	
City/State/ZIP: <u>Eugene, OR 97402</u>	
Phone: <u>541-207-0650</u>	Fax: <u>541-688-4991</u>
E-mail: <u>BECKIE ram.jack.or.com</u>	
CONTRACTOR	
Business name: <u>Stanley Brooks Plumbing</u>	
Address: <u>6310 McEwan Rd.</u>	
City/State/ZIP: <u>Lake Oswego, Oregon</u>	
Phone: <u>971-317-2959</u>	Fax: <u>[Signature]</u>
E-mail:	Plumbing. lic.: <u>PBL 1972</u>
CCB lic.: <u>218172</u>	City or metro lic. no.:

Authorized signature: [Signature]
 Print name: Becki Tester Date: 06/22/18

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received:	Permit No.: B2018-2761
Date Issued: 4/21/2018	By: W
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 8825 SW Canyon Rd	
City/State/ZIP:	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
GREASE TRAP Installation	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: PERRY LAWSON / Canyon Grill	
Address: 8825 SW Canyon Rd	
City/State/ZIP: Portland OR 97225	
Phone: 503-490-5138	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Power Plumbing Co.	
Address: 6611 SW Multnomah Blvd	
City/State/ZIP: Portland, OR 97223	
Phone: 503-244-1900	Fax: 503-244-8825
E-mail:	Plumbing lic.: 34-150PB
CCB lic.: 52378	City or metro lic. no.: 1462
Authorized signature: Charlie Hall	
Print name: Charlie Hall	Date:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (_____ sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: _____)		*	
Storm sewer (no. linear ft.: _____)		*	
Water service (no. linear ft.: _____)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap	1	20.31	2031
Medical gas (value: \$ _____)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			
TOTAL PERMIT FEE			

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

Date Received:	Permit No.: 152018-1339
Date Issued: 6/22/2018	By: <i>[Signature]</i>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 3485 SW CEDAR HILLS BLVD #180	
City/State/ZIP: BEAVERTON OR 97005	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: HALL BLVD	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
TENANT IMPROVEMENT	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: CRAFTWORK PLUMBING	
Address: 7939 SW CIRRUS DR	
City/State/ZIP: BEAVERTON OR 97008	
Phone: (503) 644-8698	Fax: (503) 644-5989
E-mail: mary@craftworkplumbing.cc	Plumbing, lic.: 20148PB
CCB lic.: 79666	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1-2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywall, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain	2	20.31	20.31
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer	3	20.31	60.93
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	4	20.31	81.24
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet	2	20.31	40.62
Water heater/expansion tank	2	20.31	40.62
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			203.10
Minimum permit fee			
<input checked="" type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			24.37
TOTAL PERMIT FEE			\$227.47

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule

Authorized signature: *Mary Kruchoski*

Print name: **MARY KRUCHOSKI** Date: **06/20/18**



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00194

Approval Code: 04503G 6/21/2018 1:22 pm

E-mailed To: Permits@3mountainsplumbing.com

B 2018-2750

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 9780 SW 167TH PL	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: PRAKASH	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S130DD05000	
DESCRIPTION OF WORK	
INSTALL BAR SINK	
APPLICANT	
Name: Raelynn Erhardt	
Phone: 5036701342	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB99	CCB lic. no.: 169499
Business Name: TREBLE SEVEN LLC	
Contact:	
Address: 524 N TILLAMOOK ST STE #102	
City/State/ZIP: PORTLAND, OR 97227	
Phone: 5036701342	Fax: 5038280515
Email: Bill@3mountainsplumbing.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load Installation of multi-purpose fire sprinkler systems
<input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Sink/basin/lavatory	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00193

Approval Code: 03584G 6/20/2018 3:18 pm

E-mailed To: Permits@3mountainsplumbing.com

B2018-2727

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12510 SW 22ND ST	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Raul Yenduru	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121AD11800	
DESCRIPTION OF WORK	
Replace water service from outside meter to inside home.	
APPLICANT	
Name: Raelynn Erhardt	
Phone: 5036701342	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB99	CCB lic. no.: 169499
Business Name: TREBLE SEVEN LLC	
Contact:	
Address: 524 N TILLAMOOK ST STE #102	
City/State/ZIP: PORTLAND, OR 97227	
Phone: 5036701342	Fax: 5038280515
Email: Bill@3mountainsplumbing.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Reclaimed wastewater	<input type="checkbox"/> Chemical drainage waste and vent systems
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Multi-purpose Fire sprinkler system	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00192

Approval Code: 110201 6/20/2018 9:10 am

E-mailed To: rebelv@mrrooterportland.com

B2018-2718

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 14150 SW HART RD	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121CC10000	
DESCRIPTION OF WORK	
Replace 80 feet of laundry/kitchen/lav drain line in crawl.	
APPLICANT	
Name: Rebel Vaughn	
Phone: 5036535301	Fax: 5036535376
Email:	
CONTRACTOR	
Plumb lic. no.: 3-434PB	CCB lic. no.: 138941
Business Name: FERREE ASSOCIATES LLC	
Contact:	
Address: PO BOX 789	
City/State/ZIP: GLADSTONE, OR 97027	
Phone: 5036535301	Fax: 5036535376
Email: stevef@mrrooterportland.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Reclaimed wastewater
<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Addition of a new motor load installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer
<input type="checkbox"/> Wastewater pretreatment system	

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Sewer			
Sanitary sewer - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

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City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00191

Approval Code: 06907J 6/20/2018 1:52 am

E-mailed To: schedule@puddletownplumbing.com

B2018-2715

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 780 NW 185TH AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.: 303	
Project Name: 1342 Vhue	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N131CB90000	
DESCRIPTION OF WORK	
Mortar set new shower base and install drain Rough in new mixing and pressure valve and shower stem	
APPLICANT	
Name: Michelle Nairan	
Phone: 9712048111	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB1132	CCB lic. no.: 195537
Business Name: PUDDLETOWN PLUMBING, LLC	
Contact:	
Address: 4207 SE WOODSTOCK BLVD #530	
City/State/ZIP: PORTLAND, OR 97206	
Phone: 5033882514	Fax:
Email: schedule@puddletownplumbing.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Tub/shower/shower pan	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

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City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00187

Approval Code: 06966D 6/18/2018 1:01 pm

E-mailed To: reamechplumbing@yahoo.com

32018-2092

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 15090 SW WHEATON LN	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S120AA02100	
DESCRIPTION OF WORK	
repair fire damage	
APPLICANT	
Name: Mike Rea	
Phone: 5039696252	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 34-389PB	CCB lic. no.: 148437
Business Name: REA MECH INC	
Contact:	
Address: 30330 SW GRASEL RD	
City/State/ZIP: HILLSBORO, OR 971239242	
Phone: 5039696252	Fax: 5036409344
Email: REAMECHPLUMBING@YAHOO.COM	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Sink/basin/lavatory	2	\$20.31	\$40.62
Tub/shower/shower pan	2	\$20.31	\$40.62
Water closet	2	\$20.31	\$40.62
Plumbing Permit Fees			
Subtotal			\$121.86
State surcharge (12% of permit total)			\$14.62
TOTAL PERMIT FEE			\$136.48

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

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City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00190

Approval Code: 115353 6/19/2018 10:55 am

E-mailed To: JOSEPH.BELL@BELLPLUMBINGPDX.COM

32018-2700

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 10035 SW SHEARWATER LOOP	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: Clair Paul	
Cross Street/directions to job site: SW Weir Rd	
Tax map/parcel no.: 1S132BA04200	
DESCRIPTION OF WORK	
Water service replacement	
APPLICANT	
Name: Joe Bell	
Phone: 5039449061	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB1919	CCB lic. no.: 216225
Business Name: BELL PLUMBING LLC	
Contact:	
Address: 14858 SW OREGON TRAIL LN	
City/State/ZIP: BEAVERTON, OR 97006	
Phone: 5039449061	Fax:
Email: JOSEPH.BELL@BELLPLUMBINGPDX.COM	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Chemical drainage waste and vent systems		
<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Multi-purpose Fire sprinkler system		
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer		
<input type="checkbox"/> Addition of a new motor load Installation of multi-purpose fire sprinkler systems			
<input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00189

Approval Code: 019360 6/19/2018 9:56 am

E-mailed To: terra@pipelineplumbing.net

B2018-2696

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 8560 SW INDIAN HILL LN	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S127BC01900	
DESCRIPTION OF WORK	
Install 2 new hose bibs and double check	
APPLICANT	
Name: Terra Steele	
Phone: 5036241906	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 3-510PB	CCB lic. no.: 158260
Business Name: PIPELINE PLUMBING & DRAIN CORP	
Contact:	
Address: 333 S STATE ST PMB V-108	
City/State/ZIP: LAKE OSWEGO, OR 97034	
Phone: 5036241906	Fax: 5036241926
Email: pipelineplumbing@frontier.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Backflow preventer	1	\$43.68	\$43.68
Hose bib	2	\$20.31	\$40.62
Minimum Fees			
Balance of permit fees			\$12.34
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

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Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 6/19/2018	Permit No. 152018-2694
Date Issued: 6/19/2018	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input checked="" type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 7298 SW 152ND AVE	
City/State/ZIP: BEAVERTON OR 97007	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
INSTALL BACKFLOW PREVENTER	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address: 7298 SW 152ND AVE	
City/State/ZIP: BEAVERTON OR 97007	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: JM IRRIGATION DESIGN	
Contact name: JUAN MARAVILLA	
Address: 1235 ALETHA ST	
City/State/ZIP: WOODBURN OR 97071	
Phone: 971 246 2327	Fax:
E-mail: jmc.maravilla(a)hotmail.com	
CONTRACTOR	
Business name: JM IRRIGATION DESIGN	
Address: 1235 ALETHA ST	
City/State/ZIP: WOODBURN OR 97071	
Phone: 971 246 2327	Fax:
E-mail: jmc.maravilla(a)hotmail.com	
CCB lic.:	Plumbing lic.:
8752	87
	City or metro lic. no.:
	8752

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (_____ sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: _____)		*	
Storm sewer (no. linear ft.: _____)		*	
Water service (no. linear ft.: _____)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ _____)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			
TOTAL PERMIT FEE			108.24

Authorized signature: [Signature]

Print name: JUAN MARAVILLA Date: 6-29-18

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00186

Approval Code: 02811B 6/18/2018 11:04 am

E-mailed To: happysplumbing@gmail.com

B2018-2078

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13860 SW HAZEL ST	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116CA04900	
DESCRIPTION OF WORK	
Replace water service	
APPLICANT	
Name: Jack Corman	
Phone: 5037886947	Fax: 5037886949
Email:	
CONTRACTOR	
Plumb lic. no.: 3-488PB	CCB lic. no.: 154339
Business Name: HAPPYS PLUMBING INC	
Contact:	
Address: 418 SE 89TH AVE	
City/State/ZIP: PORTLAND, OR 97216	
Phone: 5037886947	Fax: 5037886949
Email: leslep12345@hotmail.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load <input type="checkbox"/> Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00188

Approval Code: 03476J 6/18/2018 1:21 pm

E-mailed To: shelly@excellenceplumbing.com

PLAN REVIEW

- Please check all that apply:
- Med gas/vacuum system or health care facility
 - Vacuum drainage waste and vent system
 - Commercial booster pump
 - Addition of a new motor load
 - Installation of multi-purpose fire sprinkler systems
 - Wastewater pretreatment system
 - Reclaimed wastewater
 - Chemical drainage waste and vent systems
 - Multi-purpose Fire sprinkler system
 - Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer

FEE SCHEDULE

Description	Qty.	Ea.	Total
Internal Mainline Piping			
1 & 2 family dwelling re-pipe	1	\$144.95	\$144.95
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Plumbing Permit Fees			
Subtotal			\$197.94
State surcharge (12% of permit total)			\$23.75
TOTAL PERMIT FEE			\$221.69

TYPE OF WORK

- New Construction Addition/alteration/replacement

CATEGORY OF CONSTRUCTION

- 1 or 2 family dwelling Multi-family Commercial Accessory

JOB SITE INFORMATION AND LOCATION

Job Address: 5315 SW ELM AVE

City/State/ZIP: BEAVERTON, OR 97005

Suite/bldg./apt.no.:

Project Name: Aeto

Cross Street/directions to job site:

Tax map/parcel no.: 1S114CA10900

DESCRIPTION OF WORK

Repipe house
 Replace water service

APPLICANT

Name: Shelly Eugenio

Phone: 503-643-3459

Fax: 503-643-2815

Email:

CONTRACTOR

Plumb lic. no.: PB344

CCB lic. no.: 175768

Business Name: EXCELLENCE PLUMBING LLC

Contact:

Address: 7520 SW 140TH AVE

City/State/ZIP: BEAVERTON, OR 97008

Phone: 5036433459

Fax: 5036432815

Email: shelly@excellenceplumbing.com

Metro lic. no.:

City lic. no.:

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

Date Received: <u>1/19/2018</u>	Permit No.: <u>2018-2615</u>
Date Issued: <u>1/19/2018</u>	By: <u>[Signature]</u>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input checked="" type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>11655 7th Timberland Dr</u>	
City/State/ZIP: <u>Beaverton, OR 97007</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Sprinkler lines - Backflow Device</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Pat Conner</u>	
Address: <u>11655 7th SW Timberland Dr</u>	
City/State/ZIP: <u>Beaverton OR 97007</u>	
Phone: <u>503-591-9617</u>	Fax: <u>Ø</u>
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>Ram Jack West</u>	
Contact name: <u>Becky Tester</u>	
Address: <u>8602 Bethel Dr</u>	
City/State/ZIP: <u>Eugene, OR 97402</u>	
Phone: <u>541-707-0650</u>	Fax: <u>541-688-4991</u>
E-mail: <u>Becky@ramjack.com</u>	
CONTRACTOR	
Business name: <u>Ram Jack West</u>	
Address: <u>8602 Bethel Dr</u>	
City/State/ZIP: <u>Eugene, OR 97402</u>	
Phone: <u>541-707-0650</u>	Fax: <u>541-688-4991</u>
E-mail: <u>Becky@ramjack.com</u>	
CCB lic.: <u>1416906</u>	City or metro lic. no.:
Authorized signature: <u>Becky Tester</u>	Date:
Print name: <u>Becky Tester</u>	Date:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		.	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		.	
Storm sewer (no. linear ft.: <u>0</u>)		.	
Water service (no. linear ft.: <u>0</u>)		.	
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer	<u>1</u>	43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		.	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other: <u>Sprinkler lines</u>		20.31	20.31
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

Date Received: <u>6-18-18</u>	Permit No.: <u>B2018-2677</u>
Date Issued: <u>6-18-18</u>	By: <u>HK</u>
Payment Type: <u>VISA</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>2900 SW WEST POINTE AVE.</u>	
City/State/ZIP: <u>PORTLAND OREGON</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Replacing fixtures in 2 bathrooms, kitchen sink, ice maker, two hose bibs. Adding a 1/2 bath "powder bath" on main floor 1 water closet and pedestal lav.	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Bridge City Builders</u>	
Address: <u>2615 SW CUSTER ST</u>	
City/State/ZIP: <u>PORTLAND OR 97219</u>	
Phone: <u>503.407.1360</u>	Fax:
E-mail: <u>SSKRAMER@gmail.com</u>	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>BRIDGE CITY BUILDERS</u>	
Contact name: <u>SCOTT KRAMER</u>	
Address: <u>2615 SW CUSTER ST.</u>	
City/State/ZIP: <u>Portland, OR 97219</u>	
Phone: <u>503.407.1360</u>	Fax:
E-mail: <u>SSKRAMER@gmail.com</u>	
CONTRACTOR	
Business name: <u>H2 PLUMBING LLC</u>	
Address: <u>PO BOX 291</u>	
City/State/ZIP: <u>CORBETT OREGON 97019</u>	
Phone: <u>971-235-0504</u>	Fax:
E-mail: <u>karl.h2wall@comcast.net</u>	Plumbing, lic.: <u>PB 1695</u>
CCB lic.: <u>209247</u>	City or metro lic. no.: <u>11724</u>

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker	<u>1</u>	20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	<u>1</u>	20.31	<u>20.31</u>
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet	<u>1</u>	20.31	<u>20.31</u>
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * See Fee Schedule

Print name: KARL HALEY Date: 06/15/2018

Authorized signature:



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

B 2018-2662

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00185

Approval Code: 09791D 6/15/2018 9:27 am

E-mailed To: service@powerplumbingco.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6750 SW 168TH PL	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name: 18R907	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S119AD05100	
DESCRIPTION OF WORK	
Bath Remodel	
APPLICANT	
Name: Carl Siewell	
Phone: 5032441900	Fax: 5032448825
Email:	
CONTRACTOR	
Plumb lic. no.: 34-150PB	CCB lic. no.: 52378
Business Name: POWER PLUMBING CO	
Contact:	
Address: PO BOX 19418	
City/State/ZIP: PORTLAND, OR 972810418	
Phone: 0002441900	Fax: 5032448825
Email: laurad@powerplumbingco.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load <input type="checkbox"/> Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Tub/shower/shower pan	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

Date Received: <u>6/14/2018</u>	Permit No. <u>B2018-2626</u>
Date Issued: <u>6/14/2018</u>	By: <u>[Signature]</u>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 9116 sw pony place	
City/State/ZIP: Beaverton, Oregon 97008	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site: Murray Blvd & Brockman ave.	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
installed new double check backflow device for irrigation	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Steven C. Beskow	
Address: 9116 sw pony place	
City/State/ZIP: Beaverton, Oregon 97008	
Phone: (503) 730-1192	Fax:
E-mail: sbeskow4@gmail.com	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <u>Same as owner</u>	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	Plumbing. lic.:
CCB lic.:	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule

Authorized signature: Steven C. Beskow
 Print name: STEVEN L. BESKOW Date: 6-14-18



City Of Beaverton
 12725 SW Millkan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00184

Approval Code: 01295C 6/14/2018 2:20 pm

E-mailed To: anctilplumbing@frontier.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13360 SW THATCHER DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S133AB04000	
DESCRIPTION OF WORK	
Replace water service	
APPLICANT	
Name: William Ancil	
Phone: 5036427323	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 26-162PB	CCB lic. no.: 24184
Business Name: ANCTIL PLUMBING INC	
Contact:	
Address: 16900 SW MERLO RD	
City/State/ZIP: BEAVERTON, OR 97006	
Phone: 5036453401	Fax: 5036427755
Email:	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load <input type="checkbox"/> Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

Date Received: 6/14/18 Permit No: B 2018-2600
 Date Issued: 6/14/18 By: [Signature]
 Payment Type: _____

TYPE OF WORK

New construction Demolition
 Addition/alteration/replacement Other:

CATEGORY OF CONSTRUCTION

1- and 2-family dwelling Commercial/industrial
 Accessory building Multi-family
 Master builder Other:

JOB SITE INFORMATION AND LOCATION

Job site address: 9921 SW Trapper Ter
 City/State/ZIP: Beaverton OR 97008
 Suite/bldg./apt. no.: _____ Project name: _____
 Cross street/directions to job site: _____
 Subdivision: _____ Lot no.: _____
 Tax map/parcel no.: _____

DESCRIPTION OF WORK

40' sewer line repair

PROPERTY OWNER TENANT

Name: _____
 Address: _____
 City/State/ZIP: _____
 Phone: _____ Fax: _____
 E-mail: _____

APPLICANT CONTACT PERSON

Business name: APOLLO Drain
 Contact name: Brandin Johnson
 Address: 2208 NW Birdsedale Ave
 City/State/ZIP: Gresham OR 97030
 Phone: 503 239 8801 Fax: _____
 E-mail: OFFICE@apollodrain.com

CONTRACTOR

Business name: _____
 Address: _____
 City/State/ZIP: _____
 Phone: _____ Fax: _____
 E-mail: _____
 Plumbing lic.: 26-533AS
 City or metro lic. no.: 3082
 CCB lic.: 419418

Authorized signature: [Signature] Date: 6-12-18
 Print name: Brandin Johnson

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>049</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
			Subtotal
			Minimum permit fee
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
			State surcharge (12% of permit fee)
			TOTAL PERMIT FEE

This permit application expires if a permit is not obtained within 90 days after it has been accepted as complete.
 * See Fee Schedule



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222 V/TDD
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>9-8-16</u>	Permit No.: <u>B2015-4036</u>
Date Issued: <u>6-14-18</u>	By: <u>JK</u>
Payment Type: <u>Visa</u>	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>11360 SW (crossed)</u>	
City/State/ZIP:	
Suite/bldg./apl. no.:	Project name: <u>Fred Meyer #5</u>
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>private site plg. work</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Fred Meyer Stores INC</u>	
Address: <u>3800 SE 22nd Ave.</u>	
City/State/ZIP: <u>Portland, OR 97202</u>	
Phone: <u>503-797-3296</u>	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: <u>Barghausen Consulting Engineer</u>	
Contact name: <u>Joel Howitt</u>	
Address: <u>18215 72nd Ave. S</u>	
City/State/ZIP: <u>Kent, WA 98032</u>	
Phone: <u>425-251-6222</u>	Fax:
E-mail: <u>jhowitt@barghausen.com</u>	
CONTRACTOR	
Business name: <u>Laneco Inc.</u>	
Address: <u>8823 N. Harborgate St.</u>	
City/State/ZIP: <u>Portland, OR 97203</u>	
Phone: <u>503-239-6858</u>	Fax: <u>503-232-6130</u>
E-mail: <u>Mike.Moore@laneco.com</u>	Plumbing, llc.: <u>1611</u>
CCB llc.: <u>159497</u>	City or metro llc. no.: <u>8271</u>

Authorized signature: Michael G. Moore
 Print name: Michael G. Moore Date: 6/14/18

FEE SCHEDULE			
For special information, use check/ist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		354.31	
SFR (2) bath		407.45	
SFR (3) bath		460.61	
Each additional bath/kitchen		42.55	
Fire sprinkler (_____ sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole	<u>25</u>	18.46	<u>419.50</u>
Drywell, leach line, or trench drain		18.46	
Footing drain		18.46	
Manufactured home utilities		18.46	
Rain drain connector		18.46	
Sanitary sewer (no. linear ft.: <u>590</u>)		*	<u>229.29</u>
Storm sewer (no. linear ft.: <u>1685</u>)		*	<u>394.19</u>
Water service (no. linear ft.: _____)		*	
Fixture or Item			
Absorption valve (water hammer)		18.46	
Backflow preventer		39.71	
Backwater valve		18.46	
Clothes washer		18.46	
Dishwasher		18.46	
Drinking fountain		18.46	
Ejectors/sump	<u>2</u>	18.46	
Fixture/sewer cap		18.46	
Floor drain/floor sink/hub/ primer		18.46	
Garbage disposal		18.46	
Hose bib		18.46	
Ice maker		18.46	
Interceptor/grease trap <u>oil/water</u>	<u>1</u>	18.46	
Medical gas (value: \$ _____)		*	
Roof drain (commercial)		18.46	
Sink/basin/lavatory		18.46	
Tub/shower/shower pan		18.46	
Urinal		18.46	
Water closet		18.46	
Water heater/expansion tank		18.46	
Water meter pvt		18.46	
1&2 family dwelling re-pipe		131.77	
Multi-family/commercial re-pipe (first 20 fixtures)		131.77	
Multi-family/commercial re-pipe ea. fixture over 20		8.79	
Other:		18.46	
Subtotal			<u>9,501.90</u>
Minimum permit fee			87.85
Plan review (25% of permit fee)			<u>2,279.47</u>
State surcharge (12% of permit fee)			<u>1,134.14</u>
TOTAL PERMIT FEE			<u>\$1,534.45</u>

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222 V/TDD
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 6/12/18	Permit No: B2018-2613
Date Issued: [Signature]	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 10265 SW Talpan Dr	
City/State/ZIP: Beav, OR 97008	
Suite/bldg./apt. no.:	Project name: Bumstead
Cross street/directions to job site: SW Clydestate Terr.	
Subdivision:	Lot no.:
Tax map/parcel no.:	

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		292.82	0.00
SFR (2) bath		336.74	0.00
SFR (3) bath		380.67	0.00
Each additional bath/kitchen		35.16	0.00
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		15.25	0.00
Drywell, leach line, or trench drain		15.25	0.00
Footing drain		15.25	0.00
Manufactured home utilities		15.25	0.00
Rain drain connector		15.25	0.00
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		15.25	0.00
Backflow preventer	1	32.79	0.00
Backwater valve		15.25	0.00
Clothes washer		15.25	0.00
Dishwasher		15.25	0.00
Drinking fountain		15.25	0.00
Ejectors/sump		15.25	0.00
Fixture/sewer cap		15.25	0.00
Floor drain/floor sink/hub/ primer		15.25	0.00
Garbage disposal		15.25	0.00
Hose bib		15.25	0.00
Ice maker		15.25	0.00
Interceptor/grease trap		15.25	0.00
Medical gas (value: \$ 0)		*	0.00
Roof drain (commercial)		15.25	0.00
Sink/basin/lavatory		15.25	0.00
Tab/shower/shower pan		15.25	0.00
Urinal		15.25	0.00
Water closet		15.25	0.00
Water heater/expansion tank		15.25	0.00
Water meter pvt		15.25	0.00
1&2 family dwelling re-pipe		108.90	0.00
Multi-family/commercial re-pipe (first 20 fixtures)		108.90	0.00
Multi-family/commercial re-pipe ea. fixture over 20		7.26	0.00
Other:		15.25	0.00
Subtotal			
Minimum permit fee			72.60
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			8.71
TOTAL PERMIT FEE			\$81.31

DESCRIPTION OF WORK	
<input checked="" type="checkbox"/> PROPERTY OWNER <input type="checkbox"/> TENANT	
Name: Tracy Bumsted	
Address: 10265 SW Talpan Dr	
City/State/ZIP: Beav, OR 97008	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT <input type="checkbox"/> CONTACT PERSON	
Business name: Drake's 7 Dees	
Contact name: Becky Thomas	
Address: P.O. Box 16190	
City/State/ZIP: Port, OR 97292	
Phone: 503-546-8200	Fax:
E-mail: becky+@drakes7dees.com	
CONTRACTOR	
Business name: Drake's 7 Dees	
Address: Same as above	
City/State/ZIP: Same as above	
Phone:	Fax:
E-mail:	Plumbing lic.: 14771
CCB lic.: 3259	City or metro lic. no.: 1533
Authorized signature: [Signature]	
Print name: Becky Thomas	Date: 6-7-18

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * See Fee Schedule



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Phone: (503) 526-2493 Fax: (503) 526-2550

General Information (503) 526-2222

BeavertonOregon.gov

Date Received: 06/12/2018	Permit No.: B2018-2601
Date Issued:	By:
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/allocation/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 1850 SW 170th Ave.	
City/State/ZIP: Beaverton, OR 97003	
Suite/bldg./apt. no.:	Project name: Tualatin Valley Water
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
De commission and cap off a 1/2" water line	
<input type="checkbox"/> PROPERTY OWNER	<input checked="" type="checkbox"/> TENANT
Name: Tualatin Valley Water District	
Address: 1850 SW 170th Ave.	
City/State/ZIP: Beaverton, OR 97003	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: Shop Equipment	
Contact name: Paul	
Address: 21504 Bents Court NE	
City/State/ZIP: Aurora, OR 97002	
Phone: (503) 620-2794	Fax:
E-mail: paul@shopequipmentcoinc.com	
CONTRACTOR	
Business name: Beaverton Plumbing	
Address: 13980 SW Tualatin Valley Hwy.	
City/State/ZIP: Beaverton, OR 97005	
Phone: (503) 643-7619	Fax: (503) 643-7620
E-mail: tanya@beavertonplumbing.com	Plumbing lic.: 34-4PB
CCB lic.: 12889	City or metro lic. no.: 1047
Authorized signature:	Date: 06/12/18
Print name: Tanya Hayner	Date: 06/12/18

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap	1	20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other: cap off 1/2" water line		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review: Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule



City Of Beaverton
 12725 SW Milkan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00183

Approval Code: 08478C 6/12/2018 1:26 pm

E-mailed To: anctilplumbing@frontier.com

B2018-2597

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 14385 SW HARGIS RD	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121CC00400	
DESCRIPTION OF WORK	
Repipe hot and cold water lines	
APPLICANT	
Name: William Anctil	
Phone: 5036427323	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 26-162PB	CCB lic. no.: 24184
Business Name: ANCTIL PLUMBING INC	
Contact:	
Address: 16900 SW MERLO RD	
City/State/ZIP: BEAVERTON, OR 97006	
Phone: 5036453401	Fax: 5036427755
Email:	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Internal Mainline Piping			
1 & 2 family dwelling re-pipe	1	\$144.95	\$144.95
Plumbing Permit Fees			
Subtotal			\$144.95
State surcharge (12% of permit total)			\$17.39
TOTAL PERMIT FEE			\$162.34

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



City Of Beaverton
 12725 SW Millkan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00181

Approval Code: 040653 6/12/2018 10:31 am

E-mailed To: SygnetSolutions@gmail.com

B2018-2594

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 7655 SW BEL AIRE DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: X180172	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122CD05000	
DESCRIPTION OF WORK	
Replace the existing sewer Service Lateral from approximately the property line (the 78 ft mark) to the city mainline connection on the other side of the street in order to remove the belly in the line.	
APPLICANT	
Name: Maleah Hammons-Gumienny	
Phone: 5038222104	Fax: 5032137682
Email:	
CONTRACTOR	
Plumb lic. no.: PB1826	CCB lic. no.: 213482
Business Name: SYGNET SOLUTIONS LLC	
Contact:	
Address: PO BOX 2508	
City/State/ZIP: GRESHAM, OR 97030	
Phone: 5035163588	Fax:
Email: guybeatty@gmail.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Sewer			
Sanitary sewer - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00182

Approval Code: 512102 6/12/2018 1:20 pm

E-mailed To: allan@accurateplumbingusa.com

B2018-2599

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 14275 SW BARLOW RD	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Bsmt Bath	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121BC03223	
DESCRIPTION OF WORK	
new toilet and lav	
APPLICANT	
Name: Allan Ellerman	
Phone: 360-944-8952	Fax: 360-896-4870
Email:	
CONTRACTOR	
Plumb lic. no.: PB903	CCB lic. no.: 190781
Business Name: ACCURATE PLUMBING & HVAC LLC	
Contact:	
Address: 3021 NE 72ND DR #924	
City/State/ZIP: VANCOUVER, WA 98661	
Phone: 3608948952	Fax: 3608964870
Email: allan@accurateplumbingusa.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Sink/basin/lavatory	1	\$20.31	\$20.31
Water closet	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$56.02
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00180

Approval Code: 06105D 6/12/2018 9:12 am

E-mailed To: service@powerplumbingco.com

B 2018-2592

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 6630 SW DOVER ST	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: 18R901	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S113DA02300	
DESCRIPTION OF WORK	
Replace Water Service	
APPLICANT	
Name: Carl Siewell	
Phone: 5032441900	Fax: 5032448825
Email:	
CONTRACTOR	
Plumb lic. no.: 34-150PB	CCB lic. no.: 52378
Business Name: POWER PLUMBING CO	
Contact:	
Address: PO BOX 19418	
City/State/ZIP: PORTLAND, OR 972810418	
Phone: 0002441900	Fax: 5032448825
Email: laurad@powerplumbingco.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.

Bulfinch 33



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755

Beaverton, OR 97076

Phone: (503) 526-2493 Fax: (503) 526-2550

General Information (503) 526-2222

BeavertonOregon.gov

Date Received: <u>6/11/2018</u>	Permit No.: <u>B2018-2559</u>
Date Issued: <u>6/12/2018</u>	By: <u>[Signature]</u>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION <u>Windmill</u>	
Job site address: <u>11901-31 (000) SW WALDEN LANE</u>	
City/State/ZIP: <u>Beaverton OR 97008</u>	
Suite/bldg./apt. no.:	Project name: <u>REDWOOD LUGAR HPIS</u>
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	

DESCRIPTION OF WORK	

<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>COMMONS AT REDWOOD CREEK LLC</u>	
Address: <u>1200 SW 66th AVE Suite 300</u>	
City/State/ZIP: <u>Portland OR 97225</u>	
Phone:	Fax:
E-mail:	

<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	

CONTRACTOR	
Business name: <u>CROMWELL PLUMBING</u>	
Address: <u>25599 SW 95th AVE Suite B</u>	
City/State/ZIP: <u>Wilsonville OR 97070</u>	
Phone: <u>971-224-6304</u>	Fax:
E-mail: <u>Bulfinch@Cromwellinc.com</u>	Plumbing lic.: <u>34-167 PB</u>
CCB lic.: <u>44712</u>	City or metro lic. no.: <u>00198167</u>

Authorized signature: _____ Date: _____

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer	<u>16</u>	20.31	<u>324.96</u>
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib	<u>1</u>	20.31	<u>20.31</u>
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	<u>4</u>	20.31	<u>81.24</u>
Tub/shower/shower pan	<u>20</u>	20.31	<u>406.20</u>
Urinal		20.31	
Water closet	<u>4</u>	20.31	<u>81.24</u>
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			<u>913.95</u>
Minimum permit fee			
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		<u>228.49</u>
State surcharge (12% of permit fee)			<u>109.67</u>
TOTAL PERMIT FEE			<u>1252.11</u>

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule 1,023.62
\$1252.11



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00179

Approval Code: 323189 6/11/2018 2:59 pm

E-mailed To: razorbladeplumbing@gmail.com

B2018-2577

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 4925 SW MENLO DR	
City/State/ZIP: BEAVERTON, OR 97005	
Sulte/bldg./apt.no.:	
Project Name: Menlo Drive	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116CA00200	
DESCRIPTION OF WORK	
Plumbing 1 bath, 1 shower, 2 waterclosets, 2 lavs, 1 water heater and 1 auto washer	
APPLICANT	
Name: Brian Winters	
Phone: 5035506280	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB1928	CCB lic. no.: 213989
Business Name: RAZORBLADE PLUMBING LLC	
Contact:	
Address: 18045 SE MAIN ST	
City/State/ZIP: PORTLAND, OR 97233	
Phone: 5035506280	Fax:
Email: razorbladeplumbing@gmail.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load
<input type="checkbox"/> Wastewater pretreatment system	<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Clothes washer	1	\$20.31	\$20.31
Sink/basin/lavatory	2	\$20.31	\$40.62
Tub/shower/shower pan	2	\$20.31	\$40.62
Water closet	2	\$20.31	\$40.62
Water heater	1	\$20.31	\$20.31
Plumbing Permit Fees			
Subtotal			\$162.48
State surcharge (12% of permit total)			\$19.50
TOTAL PERMIT FEE			\$181.98

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



Plumbing Permit Application
 12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

Date Received: <i>6/11/2018</i>	Permit No.: <i>2218-2528</i>
Date Issued: <i>6/11/2018</i>	Payment Type:

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <i>15236 NW Greenbrier Pkwy</i>	
City/State/ZIP: <i>Beaverton OR</i>	
Suite/bldg./apt. no.: <i>Building A</i>	Project name: <i>Oregon Physics</i>
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<i>add ADA shower, water heater, sink, relocate lav, relocate floor-drain</i>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <i>James Rood Plumbing Inc</i>	
Address: <i>125 S. 1st Ave # 542</i>	
City/State/ZIP: <i>Hillsboro OR 97123</i>	
Phone: <i>503-547-0491</i>	Fax: <i>503-547-0492</i>
E-mail: <i>JamesRoodPlumbing@gmail.com</i>	Plumbing. lic.: <i>PG 559</i>
CCB lic.: <i>182701</i>	City or metro lic. no.: <i>9778</i>

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1-2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft)			
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)			
Storm sewer (no. linear ft.: 0)			
Water service (no. linear ft.: 0)			
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer	<i>1</i>	20.31	<i>20.31</i>
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)			
Roof drain (commercial)		20.31	
Sink/basin/lavatory	<i>2</i>	20.31	<i>40.62</i>
Tub/shower/shower pan	<i>1</i>	20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank	<i>1</i>	20.31	<i>20.31</i>
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			
<input type="checkbox"/> Check for Plan Review Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			
TOTAL PERMIT FEE			

Authorized signature: *James Rood*

Print name: *James Rood* Date: *6/7/2018*

FORM B70-1004 REV 10/17

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * See Fee Schedule



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00178

Approval Code: 00796C 6/11/2018 9:30 am

E-mailed To: antcilplumbing@frontier.com

B2018-2566

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13970 SW BONNIE BRAE CT	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116CD00614	
DESCRIPTION OF WORK	
Replace water service	
APPLICANT	
Name: William Antcil	
Phone: 5036427323	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 26-162PB	CCB lic. no.: 24184
Business Name: ANCTIL PLUMBING INC	
Contact:	
Address: 16900 SW MERLO RD	
City/State/ZIP: BEAVERTON, OR 97006	
Phone: 5036453401	Fax: 5036427755
Email:	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Expansion tank	1	\$20.31	\$20.31
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Pressure reducing valve	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$3.03
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

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The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00177

Approval Code: 07486G 6/11/2018 9:19 am

E-mailed To: permits@3mountainsplumbing.com

B 2018-2568

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 5355 SW ELM AVE	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name: Heath	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S114CA14900	
DESCRIPTION OF WORK	
Replace drain pipe only for kitchen. Kitchen drain repipe includes connecting the lavatory in main bathroom.	
APPLICANT	
Name: RaeLynn Erhardt	
Phone: 5036701342	Fax: 5036709104
Email:	
CONTRACTOR	
Plumb lic. no.: PB99	CCB lic. no.: 169499
Business Name: TREBLE SEVEN LLC	
Contact:	
Address: 524 N TILLAMOOK ST STE #102	
City/State/ZIP: PORTLAND, OR 97227	
Phone: 5036701342	Fax: 5038280515
Email: Bill@3mountainsplumbing.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load <input type="checkbox"/> Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Sink/basin/lavatory	2	\$20.31	\$40.62
Minimum Fees			
Balance of permit fees			\$56.02
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222 V/TDD
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>3/29/2018</u>	Permit No: <u>2018-1345</u>
Date Issued: <u>6-8-18</u>	By: <u>TKH</u>
Payment Type: <u>Check</u>	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>15615 SW Redbird St</u>	
City/State/ZIP: <u>BEAVERTON OR</u>	
Suite/bldg./apt. no.:	Project name: <u>Westmont (Russell)</u>
Cross street/directions to job site:	
Subdivision: <u>WESTMONT</u>	Lot no.: <u>125</u>
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>NSFR</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>DR Horton, Inc</u>	
Address: <u>4380 SW Macadam Ave Suite 100</u>	
City/State/ZIP: <u>Portland, OR 97239</u>	
Phone: <u>(503) 222-4151</u>	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: <u>DR Horton, Inc</u>	
Contact name: <u>Emerald Weeks</u>	
Address: <u>4380 SW Macadam Ave Suite 100</u>	
City/State/ZIP: <u>Portland, OR 97239</u>	
Phone: <u>(503) 222-4151</u>	Fax:
E-mail: <u>esweeks@drhorton.com</u>	
CONTRACTOR	
Business name: <u>Trademark Landscapes, Inc</u>	
Address: <u>P.O. Box 2410</u>	
City/State/ZIP: <u>Oregon City, OR 97045</u>	
Phone: <u>(503) 631-3893</u>	Fax: <u>(503) 631-4737</u>
E-mail: <u>Ellis.Steve@yahoo</u>	Plumbing, Inc. <u>6203</u>
CCB lic.: <u>11353</u>	City or metro lic. no.: <u>6796</u>
Authorized signature: <u>Steve Ellis</u>	
Print name: <u>STEVEN C. ELLIS</u>	Date: <u>1/19/19</u>

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		354.31	
SFR (2) bath		407.45	
SFR (3) bath		460.61	
Each additional bath/kitchen		42.55	
Fire sprinkler (<u>0</u> sq ft.)		.	
Site utilities			
Catch basin/ area drain/manhole		18.46	
Drywell, leach line, or trench drain		18.46	
Footing drain		18.46	
Manufactured home utilities		18.46	
Rain drain connector		18.46	
Sanitary sewer (no. linear ft.: <u>0</u>)		.	
Storm sewer (no. linear ft.: <u>0</u>)		.	
Water service (no. linear ft.: <u>0</u>)		.	
Fixture or item			
Absorption valve (water hammer)		18.46	
Backflow preventer	1	39.71	39.71
Backwater valve	1	18.46	
Clothes washer		18.46	
Dishwasher		18.46	
Drinking fountain		18.46	
Ejectors/sump		18.46	
Fixture/sewer cap		18.46	
Floor drain/floor sink/hub/ primer		18.46	
Garbage disposal		18.46	
Hose bib		18.46	
Ice maker		18.46	
Interceptor/grease trap		18.46	
Medical gas (value: \$ <u>0</u>)		.	
Roof drain (commercial)		18.46	
Sink/basin/lavatory		18.46	
Tub/shower/shower pan		18.46	
Urinal		18.46	
Water closet		18.46	
Water heater/expansion tank		18.46	
Water meter pvt		18.46	
1&2 family dwelling re-pipe		131.77	
Multi-family/commercial re-pipe (first 20 fixtures)		131.77	
Multi-family/commercial re-pipe ea. fixture over 20		8.79	
Other:		18.46	
Subtotal			
Minimum permit fee			87.85
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			10.54
TOTAL PERMIT FEE			<u>\$108.24</u>

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

Date Received:	Permit No: 52018-1344
Date Issued: 6-7-18	By: [Signature]
Payment Type: Check	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 15615 SW Redbird St.	
City/State/ZIP: Beaverton/OR	
Suite/bldg./apt. no.:	Project name: Russell
Cross street/directions to job site:	
Subdivision: Westmont	Lot no.: 125
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Adding excavator to plumbing permit per inspector's request.	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: DR Horton, Inc. - Portland	
Address: 4380 SW Macadam Ave, Suite 100	
City/State/ZIP: Portland/OR/97239	
Phone: (503) 222-4151	Fax:
E-mail: magrismr@drhorton.com	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: DR Horton, Inc. - Portland	
Contact name: Mark Grismer	
Address: 4380 SW Macadam Ave, Suite 100	
City/State/ZIP: Portland/OR/97239	
Phone: (503) 222-4151	Fax:
E-mail: magrismr@drhorton.com	
CONTRACTOR	
Business name: Renner Trucking & Excavating Inc.	
Address: 228 SW Walnut St.	
City/State/ZIP: Hillsboro, OR 97123	
Phone: 503-846-1512	Fax: 503-846-1354
E-mail: shaughn.renner@gmail.com	Plumbing. lic.: pb463
CCB lic.: 163385	City or metro lic. no.: 9956

Authorized signature: **[Signature]**

Print name: **Shaughn Renner** Date:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		380.74	0
SFR (2) bath		448.20	0
SFR (3) bath		506.67	0
Each additional bath/kitchen		46.81	0
Fire sprinkler (0 sq ft.) <<Enter square footage*			
Site utilities			
Catch basin/ area drain/manhole		20.31	0
Drywell, leach line, or trench drain		20.31	0
Footing drain		20.31	0
Manufactured home utilities		20.31	0
Rain drain connector		20.31	0
Sanitary sewer (no. linear ft.: 0) <<Enter linear feet			
Storm sewer (no. linear ft.: 0) <<Enter linear feet			
Water service (no. linear ft.: 0) <<Enter linear feet			
Fixture or item			
Absorption valve (water hammer)		220331	0
Backflow preventer		443688	0
Backwater valve		220331	0
Clothes washer		220331	0
Dishwasher		20.31	0
Drinking fountain		220331	0
Ejectors/sump		220331	0
Fixture/sewer cap		20.31	0
Floor drain/floor sink/hub/ primer		220331	0
Garbage disposal		220331	0
Hose bib		220331	0
Ice maker		220331	0
Interceptor/grease trap		220331	0
Medical gas (value: \$ 0) <<Enter valuation*			0
Roof drain (commercial)		220331	0
Sink/basin/lavatory		220331	0
Tub/shower/shower pan		220331	0
Urinal		220331	0
Water closet		220331	0
Water heater/expansion tank		220331	0
Water meter pvt		220331	0
1&2 family dwelling re-pipe		1144.95	0
Multi-family/commercial re-pipe (first 20 fixtures)		1144.95	0
Multi-family/commercial re-pipe ea. fixture over 20		9.67	0
Other:		220331	0
0 Subtotal			
Minimum permit fee			986.834
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.6
TOTAL PERMIT FEE			108.24

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule

Always recalculate when adding or



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

Date Received:	Permit No: <u>2018-1344</u>
Date Issued: <u>6-8-18</u>	By: <u>TK</u>
Payment Type: <u>check</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>15615 SW Redbird</u>	
City/State/ZIP: <u>BEAVERTON OR</u>	
Suite/bldg./apt. no.:	Project name: <u>RUSSELL</u>
Cross street/directions to job site:	
Subdivision: <u>WESTMONT</u>	Lot no.: <u>125</u>
Tax map/parcel no.:	

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath	<u>1</u>	506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>0</u>)		*	
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher	<u>1</u>	20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal	<u>1</u>	20.31	
Hose bib	<u>2</u>	20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			<u>\$567.41</u>

DESCRIPTION OF WORK	
NEW SINGLE FAMILY RESIDENCE	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>DR HORTON INC</u>	
Address: <u>4380 SW MACADAM AVE #100</u>	
City/State/ZIP: <u>PORTLAND OR 97239</u>	
Phone: <u>5032224151</u>	Fax:
E-mail: <u>MAGRISMER@DRHORTON.COM</u>	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>SAME AS ABOVE</u>	
Contact name: <u>MARK GRISMER</u>	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: <u>Edward Mullen Plumbing</u>	
Address: <u>1601 SE River Rd</u>	
City/State/ZIP: <u>Hillsboro, OR 97213</u>	
Phone: <u>(503) 640-0113</u>	Fax: <u>(503) 640-4483</u>
E-mail: <u>jeremy@edwardmullenplub</u>	Plumbing. lic.: <u>34-260PB</u>
CCB lic.: <u>92689</u>	City or metro lic. no.: <u>3526</u>

Authorized signature: 

Print name: Jeremy Crace Date:

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00175

Approval Code: 00293S 6/7/2018 1:40 pm

E-mailed To: angelica.vicon@yahoo.com

B2018-2518

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 15285 SW EMERALD ST	
City/State/ZIP: BEAVERTON, OR 97007	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S129AC01700	
DESCRIPTION OF WORK	
remodel	
APPLICANT	
Name: ROMAN BOYECHKO	
Phone: 5035897101	Fax: 5035405616
Email:	
CONTRACTOR	
Plumb lic. no.: 24-426PB	CCB lic. no.: 164217
Business Name: VICON MECHANICAL CONTRACTOR INC	
Contact:	
Address: 2720 CHERRY AVE NE	
City/State/ZIP: SALEM, OR 97301	
Phone: 503589 7101	Fax: 503540 5616
Email: angelica.vicon@yahoo.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load
<input type="checkbox"/> Wastewater pretreatment system	<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Dishwasher	1	\$20.31	\$20.31
Garbage disposal	1	\$20.31	\$20.31
Sink/basin/lavatory	3	\$20.31	\$60.93
Tub/shower/shower pan	1	\$20.31	\$20.31
Water closet	1	\$20.31	\$20.31
Plumbing Permit Fees			
Subtotal			\$142.17
State surcharge (12% of permit total)			\$17.06
TOTAL PERMIT FEE			\$159.23

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00174

Approval Code: 41702J 6/7/2018 12:22 pm

E-mailed To: jess@advancedplumbing.net

B2018-2516

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 4899 SW NORMANDY PL	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116BC01913	
DESCRIPTION OF WORK	
Replace 25 feet of cold water pipe located in crawl space,	
APPLICANT	
Name: jess mcallister	
Phone: 5032414945	Fax: 3605714188
Email:	
CONTRACTOR	
Plumb lic. no.: PB470	CCB lic. no.: 178586
Business Name: ADVANCED PLUMBING LLC	
Contact:	
Address: PO BOX 65022	
City/State/ZIP: VANCOUVER, WA 98665	
Phone: 5032414945	Fax: 3605714188
Email: jess@advancedplumbing.net	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Internal Mainline Piping			
1 & 2 family dwelling re-pipe	1	\$144.95	\$144.95
Plumbing Permit Fees			
Subtotal			\$144.95
State surcharge (12% of permit total)			\$17.39
TOTAL PERMIT FEE			\$162.34

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00173

Approval Code: 41708J 6/7/2018 12:18 pm

E-mailed To: jess@advancedplumbing.net

32018-2515

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 4895 SW NORMANDY PL	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116BC01914	
DESCRIPTION OF WORK	
Replace 25 feet of cold water pipe in crawl space. like for like,	
APPLICANT	
Name: jess mcallister	
Phone: 5032414945	Fax: 3605714188
Email:	
CONTRACTOR	
Plumb lic. no.: PB470	CCB lic. no.: 178586
Business Name: ADVANCED PLUMBING LLC	
Contact:	
Address: PO BOX 65022	
City/State/ZIP: VANCOUVER, WA 98665	
Phone: 5032414945	Fax: 3605714188
Email: jess@advancedplumbing.net	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load <input type="checkbox"/> Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Internal Mainline Piping			
1 & 2 family dwelling re-pipe	1	\$144.95	\$144.95
Plumbing Permit Fees			
Subtotal			\$144.95
State surcharge (12% of permit total)			\$17.39
TOTAL PERMIT FEE			\$162.34

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

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City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

B2018-2514

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00172

Approval Code: 41703J 6/7/2018 12:13 pm

E-mailed To: jess@advancedplumbing.net

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 4885 SW NORMANDY PL	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116BC01915	
DESCRIPTION OF WORK	
Replace 25 feet of interior crawl space cold water pipe like for like,	
APPLICANT	
Name: jess McAllister	
Phone: 5032414945	Fax: 3605714188
Email:	
CONTRACTOR	
Plumb lic. no.: PB470	CCB lic. no.: 178586
Business Name: ADVANCED PLUMBING LLC	
Contact:	
Address: PO BOX 65022	
City/State/ZIP: VANCOUVER, WA 98665	
Phone: 5032414945	Fax: 3605714188
Email: jess@advancedplumbing.net	
Metro lic. no.:	City lic. no.:

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Reclaimed wastewater
<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	
<input type="checkbox"/> Wastewater pretreatment system	

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Internal Mainline Piping			
1 & 2 family dwelling re-pipe	1	\$144.95	\$144.95
Plumbing Permit Fees			
Subtotal			\$144.95
State surcharge (12% of permit total)			\$17.39
TOTAL PERMIT FEE			\$162.34

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

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The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

Date Received: <u>6/9/2018</u>	Permit No. <u>13 2018-2491</u>
Date Issued: <u>6/9/2018</u>	By <u>aw</u>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 15420 SW Emerald St	
City/State/ZIP: Beaverton, OR 97007	
Suite/bldg./apt. no.:	Project name: Kothari 28528
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.: 1S129AC01000	
DESCRIPTION OF WORK	
Install sump pump piping	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Sourabh Kothari	
Address: 15420 SW Emerald St	
City/State/ZIP: Beaverton, OR 97007	
Phone: (415) 418-0195	Fax:
E-mail: N/A	
<input checked="" type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: TerraFirma Foundation Systems	
Contact name: Emily Singleton	
Address: 7910 SW Hunziker St	
City/State/ZIP: Tigard, OR 97223	
Phone: (541) 492-5827	Fax:
E-mail: esingleton@terrafirmafs.com	
CONTRACTOR	
Business name: Pipe Systems, LLC.	
Address: 5686 Summit St.	
City/State/ZIP: West Linn, OR 97068	
Phone: (503) 929-6014	Fax:
E-mail: N/A	Plumbing, lic.: PB1755
CCB lic.: 207668	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump	1	20.31	20.31
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule

Authorized signature: A

Print name: Emily Singleton Date: 06/06/18



City Of Beaverton
 12725 SW Millikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00171

Approval Code: 31707J 6/7/2018 11:57 am

E-mailed To: jess@advancedplumbing.net

B2018-2508

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 4875 SW NORMANDY PL	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S116BC01916	
DESCRIPTION OF WORK	
Replace 25 feet of water pipe. Replace like for like	
APPLICANT	
Name: jess mcallister	
Phone: 5032414945	Fax: 3605714188
Email:	
CONTRACTOR	
Plumb lic. no.: PB470	CCB lic. no.: 178586
Business Name: ADVANCED PLUMBING LLC	
Contact:	
Address: PO BOX 65022	
City/State/ZIP: VANCOUVER, WA 98665	
Phone: 5032414945	Fax: 3605714188
Email: jess@advancedplumbing.net	
Metro lic. no.:	City lic. no.:

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Reclaimed wastewater
<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Addition of a new motor load installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer
<input type="checkbox"/> Wastewater pretreatment system	

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Internal Mainline Piping			
1 & 2 family dwelling re-pipe	1	\$144.95	\$144.95
Plumbing Permit Fees			
Subtotal			\$144.95
State surcharge (12% of permit total)			\$17.39
TOTAL PERMIT FEE			\$162.34

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



Beaverton
OREGON

City Of Beaverton
12725 SW Milikan Way
Beaverton, OR 97076
Phone: 503-526-2542
Email: cunderwood@beavertonoregon.gov

Commercial Plumbing Authorization To Begin Work

05350-BPB-18-00170

Approval Code: 03867D 6/7/2018 10:11 am

E-mailed To: service@powerplumbingco.com

B2018-2503

TYPE OF WORK			
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement		
CATEGORY OF CONSTRUCTION			
<input type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family	<input checked="" type="checkbox"/> Commercial	<input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION			
Job Address: 10730 SW DENNEY RD			
City/State/ZIP: BEAVERTON, OR 97008			
Suite/bldg./apt.no.:			
Project Name: 18-843			
Cross Street/directions to job site:			
Tax map/parcel no.: 1S122DA00300			
DESCRIPTION OF WORK			
Replacing Water Service Building 4			
APPLICANT			
Name: Mike Warren			
Phone: 5032441900	Fax: 5032448825		
Email:			
CONTRACTOR			
Plumb lic. no.: 34-150PB	CCB lic. no.: 52378		
Business Name: POWER PLUMBING CO			
Contact:			
Address: PO BOX 19418			
City/State/ZIP: PORTLAND, OR 972810418			
Phone: 0002441900	Fax: 5032448825		
Email: laurad@powerplumbingco.com			
Metro lic. no.:	City lic. no.:		

PLAN REVIEW			
Please check all that apply:			
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load Installation of multi-purpose fire sprinkler systems
<input type="checkbox"/> Wastewater pretreatment system	<input type="checkbox"/> Reclaimed wastewater	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$43.65
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

Date Received: <u>6-7-18</u>	Permit No.: <u>B2018-2499</u>
Date Issued: <u>6-7-18</u>	By: <u>[Signature]</u>
Payment Type: <u>CHECK</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>5265 SW Main Ave</u>	
City/State/ZIP: <u>Beaverton, OR 97005</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Replacing sewer line from inside the crawl space to the sidewalk by trenching approx 115ft away	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>Robert Homes</u>	
Address: <u>5265 sw main ave</u>	
City/State/ZIP: <u>beaverton, oregon 97005</u>	
Phone: <u>(503) 819-0608</u>	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input checked="" type="checkbox"/> CONTACT PERSON
Business name: <u>Mr. Rooter Plumbing</u>	
Contact name: <u>brian lee</u>	
Address: <u>po box 789 gladstone</u>	
City/State/ZIP: <u>gladstone, oregon 97027</u>	
Phone: <u>(503) 653-5301</u>	Fax:
E-mail: <u>brianl@mrrooterportland.com</u>	
CONTRACTOR	
Business name: <u>Mr. Rooter Plumbing</u>	
Address: <u>po box 789 gladstone</u>	
City/State/ZIP: <u>gladstone, oregon 97027</u>	
Phone: <u>(503) 653-5301</u>	Fax:
E-mail: <u>brianl@mrrooterportland.com</u>	Plumbing. lic.: <u>3-434PB</u>
CCB lic.: <u>138941</u>	City or metro lic. no.:
Authorized signature: <u>[Signature]</u>	Date: <u>06/07/18</u>
Print name: <u>Brian Lee</u>	Date: <u>06/07/18</u>

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (<u>0</u> sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>115</u>)		*	96.67
Storm sewer (no. linear ft.: <u>0</u>)		*	
Water service (no. linear ft.: <u>0</u>)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input checked="" type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 6/17/2018	Permit No: 32018-2492
Date Issued: 6/17/2018	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other: getting rid of tree roots around pipe
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 15655 SW Bobwhite Cir	
City/State/ZIP: Beaverton OR 97007	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
water leak, clean out tree roots around pipe	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Joyce Kim	
Address: 17975 SW Jeremy	
City/State/ZIP: Beaverton, OR 97007	
Phone: 503) 588-6486	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Same as owner	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	Plumbing lic.:
CCB lic.:	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (_____ sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: _____)		*	
Storm sewer (no. linear ft.: _____)		*	
Water service (no. linear ft.: _____)	1	*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ _____)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			
TOTAL PERMIT FEE			108.24

Authorized signature: [Signature]
 Print name: Joyce Kim Date: _____

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00169

Approval Code: 764551 6/8/2018 12:43 pm

E-mailed To: bppdrain@yahoo.com

B2018-2477

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 14050 SW ROCHESTER DR	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Deerdorff	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S121BC10800	
DESCRIPTION OF WORK	
Replacing sewer/water lines for 3 bathrooms, 11 fixtures, water service, replace 15 ft. of main sewer line.	
APPLICANT	
Name: Luther Stalon	
Phone: 5039926249	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB1587	CCB lic. no.: 206235
Business Name: BEST PRICE PLUMBING AND DRAIN LLC	
Contact:	
Address: 4130 SW 117TH AVE #427	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 5034439874	Fax:
Email: bppdrain@yahoo.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW	
Please check all that apply:	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Reclaimed wastewater
<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Addition of a new motor load Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer
<input type="checkbox"/> Wastewater pretreatment system	

FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Sink/basin/lavatory	3	\$20.31	\$60.93
Tub/shower/shower pan	2	\$20.31	\$40.62
Water closet	3	\$20.31	\$60.93
Hose bib	2	\$20.31	\$40.62
Internal Mainline Piping			
1 & 2 family dwelling re-pipe	1	\$144.95	\$144.95
Sewer			
Sanitary sewer - first 100 feet	1	\$52.99	\$52.99
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Plumbing Permit Fees			
Subtotal			\$454.03
State surcharge (12% of permit total)			\$54.48
TOTAL PERMIT FEE			\$508.51

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00168

Approval Code: 068416 6/6/2018 10:21 am

E-mailed To: JDENNIS@ARS.COM

B2018-2474

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 11705 SW CHESHIRE RD	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: SEEBORG	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S122BA05200	
DESCRIPTION OF WORK	
2 BATH INTERIOR WASTE ONLY REPIPE IN CRAWL SPACE SARAH SEEBORG	
APPLICANT	
Name: JOYCE DENNIS	
Phone: 5038503100	Fax: 9012719706
Email:	
CONTRACTOR	
Plumb lic. no.: 34-168PB	CCB lic. no.: 127325
Business Name: AMERICAN RESIDENTIAL SERVICES LLC	
Contact:	
Address: 965 RIDGE LAKE BLVD SUITE 201	
City/State/ZIP: MEMPHIS, TN 38120	
Phone: 9012719700	Fax: 9012719706
Email: mfrederick@ars.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Clothes washer	1	\$20.31	\$20.31
Sink/basin/lavatory	3	\$20.31	\$60.93
Tub/shower/shower pan	2	\$20.31	\$40.62
Water closet	2	\$20.31	\$40.62
Plumbing Permit Fees			
Subtotal			\$162.48
State surcharge (12% of permit total)			\$19.50
TOTAL PERMIT FEE			\$181.98

Upon review and approval by your local Jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 6-6-18	Permit No.: B2018-2466
Date Issued: 6-6-18	By: JH
	Payment Type: Visa

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 2725 SW Cedar Hills	
City/State/ZIP: Beaverton OR 97	
Suite/bldg./apt. no.: 145	Project name: King Pins
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Install piping for automatic soap dispensing equipment on 3 sink dishwashers	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Williams Mechanical	
Address: 3903 Smith Ave	
City/State/ZIP: Everett WA	
Phone: 425-303-0828	Fax: 425-339-9244
E-mail:	Plumbing. lic.: 37-424 PB
CCB lic.: 126975	City or metro lic. no.: 9975

Authorized signature: *[Signature]*

Print name: Marc Coalwell Date: 6/6/18

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (_____ sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole.		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.:_____)		*	
Storm sewer (no. linear ft.:_____)		*	
Water service (no. linear ft.:_____)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ _____)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other: dispensers	3	20.31	
Subtotal			
Minimum permit fee			96.64
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			
TOTAL PERMIT FEE			\$108.24

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>6-6-18</u>	Permit No. <u>18B2018-2460</u>
Date Issued: <u>6-6-18</u>	By: <u>[Signature]</u>
Payment Type: <u>Visa</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>4816 SW Wembley Pl</u>	
City/State/ZIP: <u>Beaverton, OR</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Install catch basin in asphalt, connect to existing storm sewer pipe</u>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail: <u>info@blackrockunderground.com</u>	
CONTRACTOR	
Business name: <u>Black Rock Underground, LLC</u>	
Address: <u>267 NE 34th pl</u>	
City/State/ZIP: <u>Hillsboro OR 97124</u>	
Phone:	Fax:
E-mail:	Plumbing. lic.: <u>PB1455</u>
CCB lic.: <u>196119</u>	City or metro lic. no.:

Authorized signature: [Signature]
 Print name: Drew McVey Date: 6/6/2018

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (_____ sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole	<u>1</u>	20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: _____)		*	
Storm sewer (no. linear ft.: <u>30</u>)	<u>1</u>	*	
Water service (no. linear ft.: _____)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ _____)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			
TOTAL PERMIT FEE			<u>\$108.24</u>

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * See Fee Schedule



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: <u>6-6-18</u>	Permit No.: <u>B2018-2461</u>
Date Issued: <u>6-6-18</u>	By: <u>TK</u>
Payment Type: <u>Visa</u>	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>4808 SW Wembley Pl</u>	
City/State/ZIP: <u>Beaverton, OR</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>Open trench replace the sanitary sewer lateral in the asphalt</u>	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail: <u>info@blackrockunderground.com</u>	
CONTRACTOR	
Business name: <u>Black Rock Underground, LLC</u>	
Address: <u>267 NE 34th pl</u>	
City/State/ZIP: <u>Hillsboro OR 97124</u>	
Phone:	Fax:
E-mail:	Plumbing. lic.: <u>PB1455</u>
CCB lic.: <u>196119</u>	City or metro lic. no.:

Authorized signature: [Signature]
 Print name: DREW Malley Date: 6/6/2018

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (_____ sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>60</u>)	1	*	
Storm sewer (no. linear ft.: _____)		*	
Water service (no. linear ft.: _____)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ _____)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			
TOTAL PERMIT FEE			<u>\$106.24</u>

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * See Fee Schedule



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

Date Received: 6/1/2018	Permit No. B 2018-2391
Date Issued: 6/5/2018	By: [Signature]
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 9555 SW BARNES RD	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt. no.: 255	Project name: 18-897
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
TENANT IMPROVEMENT	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: POWER PLUMBING CO	
Contact name: CHARLIE HALL	
Address: P.O. BOX 19418	
City/State/ZIP: PORTLAND, OR 97280	
Phone: (503) 244-1900	Fax: (503) 244-8825
E-mail: SERVICE@POWERPLUMBINGCO.COM	
CONTRACTOR	
Business name: POWER PLUMBING CO.	
Address: 6611 SW MULTNOMAH BLVD	
City/State/ZIP: PORTLAND, OR 97223	
Phone: (503) 244-1900	Fax: (503) 244-8825
E-mail: SEE ABOVE	Plumbing. lic.: 34-159PB
CCB lic.: 52378	City or metro lic. no.: 1462

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)		*	
Storm sewer (no. linear ft.: 0)		*	
Water service (no. linear ft.: 0)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	1	20.31	20.31
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			11.60
TOTAL PERMIT FEE			\$108.24

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule

Authorized signature: *Kristie Bramwell*
 Print name: KRISTIE BRAMWELL Date: 06/01/18



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00166

Approval Code: 07328G 6/5/2018 1:22 pm

E-mailed To: brunerplumbing@me.com

B2018-2450

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 13595 SW COACH CT	
City/State/ZIP: BEAVERTON, OR 97008	
Suite/bldg./apt.no.:	
Project Name: Meyer	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S128CA10900	
DESCRIPTION OF WORK	
Repair leaking tile shower - install new shower pan and fixtures.	
APPLICANT	
Name: Ward Bruner	
Phone: 503-624-4880	Fax: 503-624-2173
Email:	
CONTRACTOR	
Plumb lic. no.: 26-445PB	CCB lic. no.: 81837
Business Name: BRUNER PLUMBING INC	
Contact:	
Address: PO BOX 23985	
City/State/ZIP: PORTLAND, OR 972813985	
Phone: 5036244880	Fax: 5036242173
Email: BRUNERPLUMBING.IAN@MAC.COM	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Chemical drainage waste and vent systems	<input type="checkbox"/> Multi-purpose Fire sprinkler system
<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load	<input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Tub/shower/shower pan	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$76.33
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00167

Approval Code: 307485 6/5/2018 1:56 pm

E-mailed To: jontiveros@proplumbnw.com

B2018-2451

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 12215 SW 13TH ST	
City/State/ZIP: BEAVERTON, OR 97005	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S115CC09300	
DESCRIPTION OF WORK	
Drill new water line to house. Replace water heater and complete interior water re-pipe and some secondary waste lines in the crawl space	
APPLICANT	
Name: Jennifer Ontiveros	
Phone: 5038675042	Fax: 5037196304
Email:	
CONTRACTOR	
Plumb lic. no.: PB1521	CCB lic. no.: 185634
Business Name: PRO FLEET NW INC	
Contact:	
Address: 4125 SE 10S2ND AVE	
City/State/ZIP: PORTLAND, OR 97266	
Phone: 5038675042	Fax:
Email: jontiveros@proplumbnw.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load <input type="checkbox"/> Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Clothes washer	1	\$20.31	\$20.31
Sink/basin/lavatory	2	\$20.31	\$40.62
Tub/shower/shower pan	1	\$20.31	\$20.31
Water heater	1	\$20.31	\$20.31
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Plumbing Permit Fees			
Subtotal			\$154.54
State surcharge (12% of permit total)			\$18.54
TOTAL PERMIT FEE			\$173.08

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

Date Received:	Permit No. <u>B2017-4903</u>
Date Issued: <u>11/9/2017</u>	<i>[Signature]</i>
<u>6-5-18</u> Withdrawn	Payment Type:

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 8601 SW Beaverton Hillsdale Hwy.	
City/State/ZIP: Beaverton, OR 97225	
Suite/bldg./apt. no.:	Project name: BofA Raleigh Hills
Cross street/directions to job site: Site located on north side of Beaverton Hillsdale Highway between SW 91st Ave and SW Laurelwood Ave	
Subdivision:	Lot no.:
Tax map/parcel no.: 1S114AD 400	
DESCRIPTION OF WORK	
Construction of sanitary sewer, storm drainage and water line for new Bank of America branch.	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: Lindquist Development Company	
Address: PO Box 42135	
City/State/ZIP: Portland, OR 97242	
Phone: (503) 720-2908	Fax:
E-mail: StuLindquist@aol.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>CARDNO</u>	
Contact name: Jeff Vanderdasson	
Address: 6720 SW Barbur Blvd, Suite 200	
City/State/ZIP: Portland, OR 97219	
Phone: (503) 419-2500	Fax:
E-mail: jeff.vanderdasson@cardno.com	
CONTRACTOR	
Business name: <u>TBD Caliber Plumbing & Mechanical</u>	
Address: 6036 N Cutter Circle ste. 360	
City/State/ZIP: Portland Oregon 97217	
Phone: 503.206.7591	Fax:
E-mail: office@calibermechanical.com	Plumbing. lic.: PB1658
CCB lic.: 208245	City or metro lic. no.: 12026

FEE SCHEDULE			
For special information, use check/ist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole	9	20.31	182.79
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: <u>220</u>)		*	140.35
Storm sewer (no. linear ft.: <u>436</u>)		*	158.99
Water service (no. linear ft.: <u>225</u>)		*	140.35
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	43.68
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ <u>0</u>)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			666.16
Minimum permit fee			
<input type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		
State surcharge (12% of permit fee)			79.94
TOTAL PERMIT FEE			\$746.10

Authorized signature: *[Signature]*

Print name: JEFF VANDERDASSON Date: 11/9/17

FORM B70-1004 REV 10/17

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule

144.70



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

Inter. Plbg.

Date Received: <i>1-31-18</i>	Permit No: <i>B2018-0421</i>
Date Issued: <i>6-5-18</i>	By: <i>[Signature]</i>
Payment Type: <i>Check</i>	

TYPE OF WORK	
<input checked="" type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input checked="" type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 8601 SW Beaverton Hillsdale Highway	
City/State/ZIP: Portland OR, 97225	
Subj/bldg./apt. no.:	Project name: Bank Of America
Cross street/directions to job site: SW Poplar Lane	
Subdivision:	Lot no.:
Tax map/parcel no.: Tax lots 300 & 400 on Washington map 1S1-14AD	
DESCRIPTION OF WORK	
Erect a one story freestanding bank structure with drive-up ATM on the side. Works includes building envelop, doors, windows, structural, mechanical, electrical & plumbing, storefront, sign & frameless glass system for offices, cop, millworks, finishes & associate banking equipment.	
Name: Bank of America/JLL	
Address: 275 South Valencia Avenue	
City/State/ZIP: Brea, CA 92823	
Phone: (714) 349-7021	Fax:
E-mail: thomas.sullivan@am.jll.com	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: Gensler	
Contact name: Jeffrey Schmlerer	
Address: 2101 Webster St., Suite 2000	
City/State/ZIP: Oakland, CA 94612	
Phone: (510) 625-7400	Fax:
E-mail: jeff_schmlerer@gensler.com	
CONTRACTOR	
Business name: Caliber Plumbing & Mechanical, Inc.	
Address: 6036 N Cutter Circle Ste. 360	
City/State/ZIP: Portland, OR 97217	
Phone: 503-206-7591	Fax: 503-285-5769
E-mail: office@calibermechanical.com	Plumbing. No.: PB1658
OCB No.: 208245	City or metro No.: 12026
Authorized signature: <i>[Signature]</i>	Date: 4-30-18
Print name: MATT DOMA	

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1-2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (0 sq ft.)			
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: 0)			
Storm sewer (no. linear ft.: 0)			
Water service (no. linear ft.: 0)			
Fixture or Item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain	1	20.31	20.31
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer	2	20.31	40.62
Garbage disposal		20.31	
Hose bib	4	20.31	81.24
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ 0)			
Roof drain (commercial)	18	20.31	365.58
Sink/basin/lavatory	4	20.31	81.24
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet	2	20.31	40.62
Water heater/expansion tank	1	20.31	20.31
Water meter prv		20.31	
1-2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			649.92
Minimum permit fee			
<input checked="" type="checkbox"/> Check for Plan Review	Plan review (25% of permit fee)		162.48
	State surcharge (12% of permit fee)		77.99
TOTAL PERMIT FEE			\$727.91

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00165

Approval Code: 06798G 6/4/2018 6:14 pm

E-mailed To: Permits@3mountainsplumbing.com

B2018-2435

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 515 SW 167TH AVE	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name: Goldstein	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S106AD10300	
DESCRIPTION OF WORK	
replace water service from meter to home	
APPLICANT	
Name: Raelynn Erhardt	
Phone: 5036701342	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: PB99	CCB lic. no.: 169499
Business Name: TREBLE SEVEN LLC	
Contact:	
Address: 524 N TILLAMOOK ST STE #102	
City/State/ZIP: PORTLAND, OR 97227	
Phone: 5036701342	Fax: 5038280515
Email: Bill@3mountainsplumbing.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility	<input type="checkbox"/> Vacuum drainage waste and vent system	<input type="checkbox"/> Commercial booster pump	<input type="checkbox"/> Addition of a new motor load
<input type="checkbox"/> Installation of multi-purpose fire sprinkler systems	<input type="checkbox"/> Wastewater pretreatment system		
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Expansion tank	1	\$20.31	\$20.31
Site Utilities			
Water Service - first 100 feet	1	\$52.99	\$52.99
Minimum Fees			
Balance of permit fees			\$23.34
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

05350-BPB-18-00163

Approval Code: 412055 6/2/2018 12:55 pm

E-mailed To: plumbing@prodrainpdx.com

32018-2409

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 5575 SW DOVER LN	
City/State/ZIP: BEAVERTON, OR 97225	
Suite/bldg./apt.no.:	
Project Name: Skeels 705157	
Cross Street/directions to job site:	
Tax map/parcel no.: 1S113DA08100	
DESCRIPTION OF WORK	
repipe interior water lines	
APPLICANT	
Name: Deanna Oakley	
Phone: 503-533-0430	Fax: 503-533-9376
Email:	
CONTRACTOR	
Plumb lic. no.: 26-776PB	CCB lic. no.: 108504
Business Name: PRO DRAIN & ROOTER SERVICE INC	
Contact:	
Address: 10200 SW ALLEN BLVD #H	
City/State/ZIP: BEAVERTON, OR 97005	
Phone: 5035330430	Fax:
Email: plumbing@prodrainpdx.com	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load <input type="checkbox"/> Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Internal Mainline Piping			
1 & 2 family dwelling re-pipe	1	\$144.95	\$144.95
Plumbing Permit Fees			
Subtotal			\$144.95
State surcharge (12% of permit total)			\$17.39
TOTAL PERMIT FEE			\$162.34

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



City Of Beaverton
 12725 SW Milikan Way
 Beaverton, OR 97076
 Phone: 503-526-2542
 Email: cunderwood@beavertonoregon.gov

Residential Plumbing Authorization To Begin Work

B2018-2419

05350-BPB-18-00164

Approval Code: 07516C 6/4/2018 9:22 am

E-mailed To: anctilplumbing@frontier.com

TYPE OF WORK	
<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Addition/alteration/replacement
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1 or 2 family dwelling	<input type="checkbox"/> Multi-family <input type="checkbox"/> Commercial <input type="checkbox"/> Accessory
JOB SITE INFORMATION AND LOCATION	
Job Address: 17715 NW WALKER RD	
City/State/ZIP: BEAVERTON, OR 97006	
Suite/bldg./apt.no.:	
Project Name:	
Cross Street/directions to job site:	
Tax map/parcel no.: 1N131CA12800	
DESCRIPTION OF WORK	
Replace hot and cold water supplies to kitchen sink and water heater. Replace water heater.	
APPLICANT	
Name: William Anctil	
Phone: 5036427323	Fax:
Email:	
CONTRACTOR	
Plumb lic. no.: 26-162PB	CCB lic. no.: 24184
Business Name: ANCTIL PLUMBING INC	
Contact:	
Address: 16900 SW MERLO RD	
City/State/ZIP: BEAVERTON, OR 97006	
Phone: 5036453401	Fax: 5036427755
Email:	
Metro lic. no.:	City lic. no.:

PLAN REVIEW			
Please check all that apply:		<input type="checkbox"/> Reclaimed wastewater <input type="checkbox"/> Chemical drainage waste and vent systems <input type="checkbox"/> Multi-purpose Fire sprinkler system <input type="checkbox"/> Water service with inside diameter or nominal pipe size of 2" or more except 2" systems designed/stamped by licensed Oregon engineer	
<input type="checkbox"/> Med gas/vacuum system or health care facility <input type="checkbox"/> Vacuum drainage waste and vent system <input type="checkbox"/> Commercial booster pump <input type="checkbox"/> Addition of a new motor load <input type="checkbox"/> Installation of multi-purpose fire sprinkler systems <input type="checkbox"/> Wastewater pretreatment system			
FEE SCHEDULE			
Description	Qty.	Ea.	Total
Fixture or Item			
Sink/basin/lavatory	1	\$20.31	\$20.31
Water heater	1	\$20.31	\$20.31
Minimum Fees			
Balance of permit fees			\$56.02
Plumbing Permit Fees			
Subtotal			\$96.64
State surcharge (12% of permit total)			\$11.60
TOTAL PERMIT FEE			\$108.24

Upon review and approval by your local jurisdiction, your permit will be e-mailed or faxed within one business day, with instructions on how to schedule your inspection.

NOTE: This Authorization To Begin Work expires within 180 days if a permit is not obtained.

The local building department may determine that an Authorization To Begin Work is null and void if it does not meet applicable land use laws and local ordinances.



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 6-4-18	Permit No: 82018-2415
Date Issued: 6-4-18	By: MK
Payment Type: MC	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input checked="" type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 11850 SW Iron Horse Lane	
City/State/ZIP: Beaverton	
Suite/bldg./apt. no.:	Project name: Hampton Court
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Replace water service line in crawl space for 4 buildings	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Excellence Plumbing LLC	
Address: 7913 SW Nimbus Ave	
City/State/ZIP: Beaverton, OR 97008	
Phone: 503-643-3459	Fax:
E-mail: shelly@excellenceplumbing.com	Plumbing lic.: PB344
CCB lic.: 175768	City or metro lic. no.:

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (_____ sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.:_____)		*	
Storm sewer (no. linear ft.:_____)		*	
Water service (no. linear ft.: 320)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ _____)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			
TOTAL PERMIT FEE			(\$206.11)

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule



Plumbing Permit Application

12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

OFFICE USE ONLY	
Date Received: 0-4-18	Permit No.: B2018-2407
Date Issued: 0-4-18	By: JHK
Payment Type: VISC	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: 15900 SW Regatta Ln	
City/State/ZIP: Portland, OR 97209	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision:	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
Install Backflow Preventer	
<input type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: ME three LLC	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
<input type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name:	
Contact name:	
Address:	
City/State/ZIP:	
Phone:	Fax:
E-mail:	
CONTRACTOR	
Business name: Land-Pro LLC	
Address: P.O. Box 3121	
City/State/ZIP: Hillsboro, OR 97123	
Phone: 971-327-1363	Fax:
E-mail:	Plumbing, lic.:
ECB lic.: 95148	City or metro lic. no.:
Authorized signature: [Signature]	
Print name: Bardenio,	Date: 08-04-2018

FEE SCHEDULE			
For special information, use checklist.			
Description	Qty.	Ea.	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (_____ sq ft.)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft.: _____)		*	
Storm sewer (no. linear ft.: _____)		*	
Water service (no. linear ft.: _____)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer	1	43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ _____)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory		20.31	
Tub/shower/shower pan		20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			
TOTAL PERMIT FEE			108.24

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.

* See Fee Schedule



Plumbing Permit Application
 12725 SW Millikan Way / PO Box 4755
 Beaverton, OR 97076
 Phone: (503) 526-2493 Fax: (503) 526-2550
 General Information (503) 526-2222
 BeavertonOregon.gov

Date Received: <u>5/1/2018</u>	Permit No. <u>B2018-2386</u>
Date issued: <u>5/1/2018</u>	By: <u>[Signature]</u>
Payment Type:	

TYPE OF WORK	
<input type="checkbox"/> New construction	<input type="checkbox"/> Demolition
<input checked="" type="checkbox"/> Addition/alteration/replacement	<input type="checkbox"/> Other:
CATEGORY OF CONSTRUCTION	
<input checked="" type="checkbox"/> 1- and 2-family dwelling	<input type="checkbox"/> Commercial/Industrial
<input type="checkbox"/> Accessory building	<input type="checkbox"/> Multi-family
<input type="checkbox"/> Master builder	<input type="checkbox"/> Other:
JOB SITE INFORMATION AND LOCATION	
Job site address: <u>15150 SW Copper Ct</u>	
City/State/ZIP: <u>BEAVERTON OR.</u>	
Suite/bldg./apt. no.:	Project name:
Cross street/directions to job site:	
Subdivision: <u>Shadow Creek</u>	Lot no.:
Tax map/parcel no.:	
DESCRIPTION OF WORK	
<u>MST BATH Remodel</u>	
<input checked="" type="checkbox"/> PROPERTY OWNER	<input type="checkbox"/> TENANT
Name: <u>James + Carlene Blauch</u>	
Address: <u>15150 SW Copper Ct</u>	
City/State/ZIP: <u>Beav. OR</u>	
Phone:	Fax:
E-mail:	
<input checked="" type="checkbox"/> APPLICANT	<input type="checkbox"/> CONTACT PERSON
Business name: <u>BRITTANY Homes Inc</u>	
Contact name: <u>JEFF LUEDLOFF</u>	
Address: <u>22275 SW Scholls-Sherwood Rd.</u>	
City/State/ZIP: <u>Sherwood OR 97140</u>	
Phone: <u>503-349-4326</u>	Fax: <u>503-628-5421</u>
E-mail: <u>JEFF@BRITTANYHOMESINC.COM</u>	
CONTRACTOR	
Business name: <u>GRAVITY Plumbing</u>	
Address: <u>14935 S Greentree Dr.</u>	
City/State/ZIP: <u>ORIGON CITY OR. 97045</u>	
Phone: <u>503-490-0763</u>	Fax: <u>503-650-3866</u>
E-mail:	Plumbing lic. <u>PB 1065</u>
CCB lic. <u>194505</u>	City or metro lic. no. <u>10685</u>

Authorized signature: [Signature]
 Print name: Jonathon Hinkle Date: 5-30-18

FEE SCHEDULE			
For special information, use checklist			
Description	Qty	Ea	Total
New 1- 2-family dwellings (includes 100 ft. for each utility connection)			
SFR (1) bath		389.74	
SFR (2) bath		448.20	
SFR (3) bath		506.67	
Each additional bath/kitchen		46.81	
Fire sprinkler (_____ sq ft)		*	
Site utilities			
Catch basin/ area drain/manhole		20.31	
Drywell, leach line, or trench drain		20.31	
Footing drain		20.31	
Manufactured home utilities		20.31	
Rain drain connector		20.31	
Sanitary sewer (no. linear ft _____)		*	
Storm sewer (no. linear ft _____)		*	
Water service (no. linear ft _____)		*	
Fixture or item			
Absorption valve (water hammer)		20.31	
Backflow preventer		43.68	
Backwater valve		20.31	
Clothes washer		20.31	
Dishwasher		20.31	
Drinking fountain		20.31	
Ejectors/sump		20.31	
Fixture/sewer cap		20.31	
Floor drain/floor sink/hub/ primer		20.31	
Garbage disposal		20.31	
Hose bib		20.31	
Ice maker		20.31	
Interceptor/grease trap		20.31	
Medical gas (value: \$ _____)		*	
Roof drain (commercial)		20.31	
Sink/basin/lavatory	<u>2</u>	20.31	
Tub/shower/shower pan	<u>2</u>	20.31	
Urinal		20.31	
Water closet		20.31	
Water heater/expansion tank		20.31	
Water meter pvt		20.31	
1&2 family dwelling re-pipe		144.95	
Multi-family/commercial re-pipe (first 20 fixtures)		144.95	
Multi-family/commercial re-pipe ea. fixture over 20		9.67	
Other:		20.31	
Subtotal			
Minimum permit fee			96.64
Plan review (25% of permit fee)			
State surcharge (12% of permit fee)			
TOTAL PERMIT FEE			

This permit application expires if a permit is not obtained within 180 days after it has been accepted as complete.
 * See Fee Schedule